Covid.Tips

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How To Talk To Your Loved Ones About Covid

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  - U.S. Military
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About this document

Modeled after and heavily inspired by this document by Ruby Levine, "Let Them Eat Plague," and "a long winter crip survival guide for pandemic year 4/forever" by Leah-Lakshmi Piepzna-Samarasinha and Tina “constant tt” Zavitsanos.

> The work we are doing to stay safe matters. The work we are doing to keep ourselves alive—fully alive, not just existing—matters.

–Leah Lakshmi Piepzna-Samarasinha and Tina “constant tt” Zavitsanos

> Every chain of transmission that is broken is valuable, every person that doesn't get sick, that doesn't lose that week of work, or doesn't become disabled or die, from the minorest of inconveniences, to the greatest of losses: every single one of those things is valuable.

–Becca, speaking on *Death Panel*

Tested positive? Looking for a guide to navigating Covid infections?

Check out Clean Air Club's My Covid+ Plan.

About the authors

Who are we? We are a multiracial, multiethnic and international group of queer, disabled, chronically ill, and neurodivergent writers, workers, artists, and organizers from various socioeconomic backgrounds and different sets of lived experiences. This document represents the labor of those whose resources we drew from and gathered, our own original words, and feedback from others who have already begun the hard and necessary work of talking to their loved ones about the realities of Covid. We are grateful to everyone whose work and care has made this living document possible, and we plan to continue expanding it together.

What's new in this edition? (2024.07)

In this updated version, we've added sections on talking to your children about Covid, the importance of allowing ourselves to grieve, some tips on traveling safely, and more. We've expanded the section on the mitigations being taken by the rich, updated some links throughout to include more recent studies and stats, and added information about mitigations.

This is not a universal resource, and unfortunately reflects a Western, U.S.-centric bias in its current form; part of this is structural and due to the fact that the pandemic itself has largely been driven by the United States and its destructive policy choices from the start. We are still working toward a more global and more modular version of this document and will continue to improve on this front as we grow and expand the doc. Until then, we hope that your conversations will always move toward a discussion of Covid as a global issue, not just an American or Western one. We hope that you will use this resource as a starting point in your own conversations and find local statistics for your area whenever possible, keeping in mind that this pandemic is global and affects all of us, no matter where we are.

We hope this guide will continue to serve as a useful tool for your advocacy work, and we're so grateful to each and every person who is doing the work of sharing these truths. Thank you for all the hard work you're doing.

2024.04 update: Added link to information about navigating a Covid infection.

2024.07 update: Added link to Lola Germs' excellent video essay about Long Covid to various places in the doc.

Questions, comments, or suggestions for revision can be sent to maskupwithus at gmail dot com.

So, you love someone who has stopped taking Covi precautions (or never took them to begin with)

What are you going to do now? If you're here, you're concerned about keeping your community safe. But how? What do those conversations actually look like? This guide is a template for navigating these emotionally-charged and difficult conversations. It attempts to put you on a good path for teaching others what you know while encouraging mask wearing, doing what you can to protect your community, including yourself.

We are speaking across a huge divide.

Everyone who has stopped masking is living in a different version of reality than we are. In their minds, Covid is over. Or milder, or a problem for the sick. All around, restaurants are open. The bars are open. The mall is open. False 'normalcy' is everywhere.

The truth of the matter is unfathomable. What we know to be true defies belief. We are asking people to believe that everything they see around them right now is a lie. That every single person in charge has lied to them. That we are in freefall. It is entirely unsurprising that so many people cannot and will not believe us. Not at first.

The horror of what we are saying is nearly incomprehensible. Please try to fathom what it would be like to hear this, if you believed things were normal. Try to put yourself in this other person's shoes. Explaining transmission is not enough. Awareness is not enough. We must model and inspire action, and so we have to explain why restaurants are still open. Why the media says it's over. Why all around us, there is silence.

We are asking people, essentially, to distrust the choices and assessments of everyone around them, as well as what their eyes and ears are telling them. We are asking them to realize their old life is gone forever. This is a huge ask. It is the hugest possible ask. On top of that, people cannot fathom how it could be true.

We have to find a way to build an on-ramp, to essentially "onboard" people into th reality we've all gotten so used to. We have to remember that we are asking a lot. A of this is normal to us now, and we've gotten acclimated (somehow). Our mitigations this is normal to us now, and we've gotten acclimated (somehow). Our mitigations reflect the truth, and they are the right things to do. But we are asking people to change their entire lives in a very serious way. It's not just masks, at this point. It's everything.

But ALL IS NOT LOST. We have been deeply lied to and actively betrayed—by our governments, media outlets, and even medical professionals—for years. But there is hope and there is a way out. We can make a future without Covid.

To quote perhaps the most comprehensive analysis of the pandemic so far, "Let Them Eat Plague":

> You could be forgiven for not realizing we're still in the middle of a pandemic, considering the total absence of media coverage. If it was important, you'd surely be hearing about it, right? The last variant you heard about was likely omicron. The last you heard about vaccines was likely "we strongly encourage everyone to get boosted." The last you heard about masks was that they work, but they're not required. And why would you bother wearing masks anyway if, as the United States president himself proclaimed, "The pandemic is over"?

> Here's the truth: the pandemic is not over. It's much worse than you have been led to believe. And unless you've spent the past several years reading scientific studies on the subject, it can be hard to convey just how wrong the public perception of Covid really is. Everything from how it's spread, to how it's prevented, to what it does once it's in your body, is being tragically misunderstood.

> None of this is an accident. It's not your "fault" if you aren't a virologist, immunologist, epidemiologist, or evolutionary biologist. It's the job of experts and trusted voices to convey the truth and give you guidance. Not only have they failed at this, they h engaged in an active disinformation campaign dedicated to making the pande "disappear". This has not been the result of a classic caricature of conspiracy —

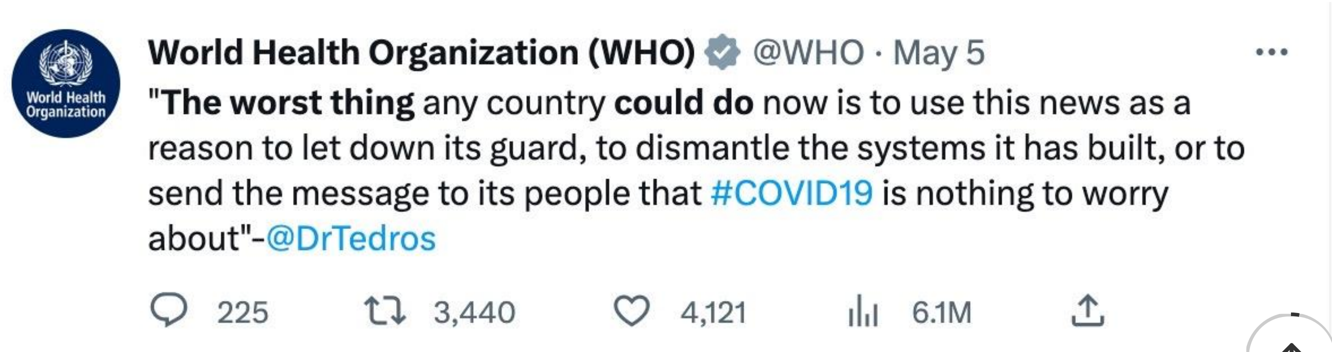
> some tiny council of elites, gathered in the shadows to craft policy out of whole cloth. What we're actually witnessing is the quiet collusion of class interest. This form of conspiracy is a feature of cultural hegemony, and it has aligned itself in direct opposition to public health and scientific reality. A "conspiracy" of this sort takes place in full view of the public. Every actor within it has openly telegraphed motivations that we are all taught to see as acceptable: keeping the current economic system intact at all costs.

–"Let Them Eat Plague"

The end of the emergency, the continuation of our struggle

On May 5, 2023 the World Health Organization officially ended the public global health emergency, signaling (wrongly) to the public that the threat of Covid-19 is behind us. Never mind that this very same day, they put out another official statement that conveyed the opposite message:

> "The worst thing any country could do now is to use this news as a reason to let down its guard, to dismantle the systems it has built, or to send the message to its people that #COVID19 is nothing to worry about."



World Health Organization (WHO) @WHO · May 5

"**The worst thing** any country **could do** now is to use this news as a reason to let down its guard, to dismantle the systems it has built, or to send the message to its people that #COVID19 is nothing to worry about"-@DrTedros

Never mind that millions are dead. long term outcomes for repeated infections are

Never mind that millions are dead, long term outcomes for repeated infections are unknown (though the statistics aren't looking good), and millions more are suffering from Long Covid.

This WHO announcement was a devastating blow, utterly unsurprising, and paradoxically, a moment filled with potential.

It was devastating, because it made it even easier for workplaces and healthcare providers to justify their lack of mitigations, and because this announcement misled many ordinary people into thinking the threat has passed. It will likely lead to an increase in the harassment that disabled people face in medical settings, or while wearing a mask in public spaces. It is unsurprising, because the capitalist strategy for handling the pandemic has been a strategy of minimization and erasure from the start (as we will discuss at length in this resource). And yet, this is also a moment filled with potential.

Why potential? The truth is that many, many people are waking up to the non-normalcy of this forced "back to normal" approach. People are expressing their disbelief and frustration over being sick all year long. People are running out of sick days. Friends and relatives are getting Long Covid. Basically, the so-called normal world is showing cracks in the façade—and people are asking: "Why is this happening?" Trust in governments and politicians is at an all-time low. People are fed up. And the official narrative (with all of its confusion and contradictions) makes no sense.

Meanwhile, the things that we are saying make a lot of sense. We have the truth on our side. The government's strategy is one of denial, negation, and lies. But presence, truth, and a vision for a better future will always be more compelling than a lie. Unlike what WHO is saying, our narrative is honest, consistent, and backed by science. Unlike the WHO, we value human life and are offering actual care. Denial as a strategy cannot work for long. People are seeking answers; we have to educate one another and offer a path forward. We have to keep one another safe.

Our mission and the challenge ahead

Most people trust that it is the government's job to protect them. And most people don't have the time, resources, scientific literacy, or energy to keep up with the latest research, conflicting guidance, and up-to-date information about the pandemic.

Reducing the number of Covid infections happening in our communities is essential. Giving people the knowledge and tools to protect themselves in the face of government neglect and violence is essential. Trying to reduce harm in our communities is essential. And a livable future depends on us addressing Covid.

As we prepare for what's to come, we cannot abandon one another or decide that these conversations are pointless. In other words: we can't leave our neighbors behind. We have to try to share the knowledge that we have learned. So let's get to work.

Political frameworks

We believe in abolition, mutuality, bodily autonomy, self-determination, equality, and interdependence. We believe in centering the most vulnerable and approaching others with curiosity. We value intentionality, humility, compassion, directness, honesty, trust, accountability, and consent.

Our political frameworks include: the abolitionist movement, Black liberation, intersectional historical materialism, antifascism, anticapitalism, anticolonialism, anti-imperialism, disability justice, transformative justice, Indigenous sovereignty, trans rights, and liberatory harm reduction.

From the river to the sea, Palestine will be free! 🇵🇸(All of our struggles are linked.)

We are always willing to learn and grow, but we are not willing to compromise on any of these values.

Summary of praxis

We believe in humanity. It is not true that most people are selfish, bad, stupid, ignorant, or unwilling to learn. Most people do not know what is going on, or feel powerless to stop it, or both.

A great majority of people who have stopped taking Covid precautions have done so because they have been misled, because they are exhausted, and because we are in an information vacuum. In ways large and small, the U.S. government is downplaying Covid's continued existence and evolution. The U.S. is not alone in this, and almost no matter where you are in the world—as we write this in 2023—your government is probably using the same violent tactics to downplay and minimize the pandemic.

The abandonment by our governments under the guise of "individual responsibility" has meant that harming others as the pandemic continues has been unavoidable for many, many people. Through public policy decisions, propaganda campaigns, and economic pressures, most of us have been forced to be complicit at one point or another; for example, many of us have been forced to travel for work, or have unmasked in a social situation under pressure (to our own deep regret). But many people who are presently engaging in reckless behaviors (like not wearing masks) are not fully aware of the consequences of their actions. Or if they are aware, they don't feel empowered to act, or to face the truth.

Individual risk assessment is nonsensical in an airborne pandemic with a disease that can be transmitted asymptomatically; we share the air and we all share this earth.

So we ask that you do not tell people to assess their individual risk, because encouraging more individuality will not get us out of this mess. Instead, you can say: "Save your own life. Protect your loved ones. Protect your neighbors. Break the chain of transmission." We don't want to lose all of our friends and family (most of whom are no longer taking the same precautions we are), and we don't think you should have to, either.

When we have conversations with people in our communities, we need to remember that this is all so much bigger than us and our feelings about individuals. By doing work, we have taken on the role of agitating for change. So we have to try to hold ourselves to a higher standard: in our personal lives, in our politics, and in our art. We should always be cultivating and nurturing our love and respect for the people (including ourselves). We must continually strive to understand the needs and ideas of the people in our communities, and avoid distancing ourselves from our neighbors by seeing ourselves as better or more enlightened. We should do our best to be patient and undertake this task with care, and not misdirect our righteous anger at these injustices towards our friends. Indulging in that type of thinking maintains the divides created to keep us from collaborating together.

We believe that the great majority of people can, and must, be reached and cared for. In our art and in our organizing, we must remember that our own communities are not our enemy.

We recognize that it is not actually possible to know who is open to change and who is not without first speaking with someone and showing genuine curiosity and compassion.

So when we say we use liberatory harm reduction approaches as a political framework re: Covid, we're not talking about personal risk assessments or justifying harm. We are taking this approach when talking with other people about mitigations.

We are seeking to transform the root causes of harmful ableist behaviors using harm reduction strategies to:

- Advocate for, center, and protect the people who are most vulnerable to harm from Covid, while recognizing that everyone is at risk for severe outcomes and death
- Provide accurate and non-judgemental education to people who have stopped masking
- Help people obtain high-quality masks that fit them
- Teach others how to wear their masks properly

- Teach others how to wear their masks properly

- Teach others how to gather more safely in person

- Encourage more and better masking practices, recognizing that imperfect mask wearing is better than none at all

- Push for better air filtration, air cleaning, and better ventilation in indoor spaces

- Create community with others who are shielding themselves from Covid

- Protect the right to wear masks in public spaces (which is already under threat)

- Protect ourselves and others from forced infection with Covid

For us, this looks like educating people, encouraging mask wearing as much as possible, and recognizing that most people are not going to stay home indefinitely.

We are not telling people to stay home altogether. We are asking them to wear the highest-quality masks they can obtain while sharing indoor air with others. We understand the anger at others who are engaging in unnecessary travel, etc., and we often feel it. But more people masking imperfectly and more often is what needs to happen.

We cannot control how others behave or act on the information we give them. We won't tell them it's OK to go to stadium shows, and we can share with them how those choices impact others. We can speak honestly with loved ones about our feelings and share our knowledge. What they do with that knowledge is up to them.

We fully understand why some people might disagree with these choices and we do not want to speak over or minimize those people's perspectives. Our choices and experiences with disabilities do not negate the different perspectives of other disabled people.

people.

Guidelines and our boundaries

If you are planning to use this guide as a resource for your conversations, we ask that you respect the following boundaries (and agree to all of the following guidelines) before reading further:

1. We do not believe in dehumanizing other people OR any kind of abuse. Spreading a virus that can disable and kill people is unacceptable behavior, but it is mainly happening because of failures of government, not individual choice. It is in that context that we are trying to end this behavior by sharing the realities of Covid transmission and the harms this virus can cause. We fundamentally believe that this is not inevitable, and that there is always hope for a future without Covid. **DO NOT use this guide to rationalize harming others or to spread despair and hopelessness.**

2. We do not believe in excusing the behavior of those who have the ability, knowledge, and resources to wear high-quality masks when sharing air with others. Encouraging masking more often does not imply that we are giving people a pass to unmask sometimes. **DO NOT use this guide to tell others that it's OK for them to unmask *sometimes* in public spaces.** Our entire society has already given us permission to unmask and think only of ourselves. We don't need to add to this chorus.

3. You do not have the ability to absolve other people for their harmful behavior. It is possible to invite other people to reflect honestly on their behavior and make better choices without shaming them AND also without making excuses for their harm. **DO NOT use this guide to berate other people OR to absolve them.**

4. **DO NOT use this guide to minimize the harms of spreading Covid.**

5. We believe in bodily autonomy, in mutuality, and in consent. **DO NOT use this guide to coerce or manipulate others into changing their behavior.**

> “Harm reduction happens in the pockets of exquisite care we show our loved ones, without questioning or judging their life choices, or imagining that we know better than they do. It’s extending a belief system of true autonomy and self-determination: I trust you, I’m not afraid of you, here are tools that might be useful to you, do with them what you will.”
>
> –Tourmaline, from *Saving Our Own Lives: A Liberatory Practice of Harm Reduction*

Who this guide is for

This guide is meant to help those who are still taking strict Covid precautions and who believe in the principles of disability justice, abolition, anticapitalism, and harm reduction to talk with people who:

- Are engaging in good faith
- Are basing their decisions and behavior on misconceptions about Covid
- Are willing to grow and change

Only you can say if someone meets those criteria. This guide won’t help you argue with abusive people or people arguing in bad faith. Sometimes it’s worth using these arguments with bad faith actors if your responses are posted publicly (because people watching the interaction may recognize the truth of your statements even though the bad faith actors won't), but generally, it's better to save your energy to speak with the people who are willing to change.

Core resources

Harm reduction

What is harm reduction and how can it apply to Covid advocacy work?

To quote Dominique Morgan: "Liberatory Harm Reduction is grace in practice", and to quote Shira Hassan:

> Harm reduction was started by BIPOC organizers, by people in the sex trade, by sex workers, by trans people, by drug users, by young people, by people who were street based, by disabled and chronically ill people, by anti-racist activists.

If you are using the term harm reduction, we highly recommend listening to (or reading) this episode of *Movement Memos* where Hassan explains Liberatory Harm Reduction and the history of this movement. We cannot separate this term from its history and its radical roots.

Because harm reduction demands that interventions designed to protect people reflect specific individual / community needs, there is no universal definition of or formula for implementing harm reduction. We are working from Hassan's definition of harm reduction:

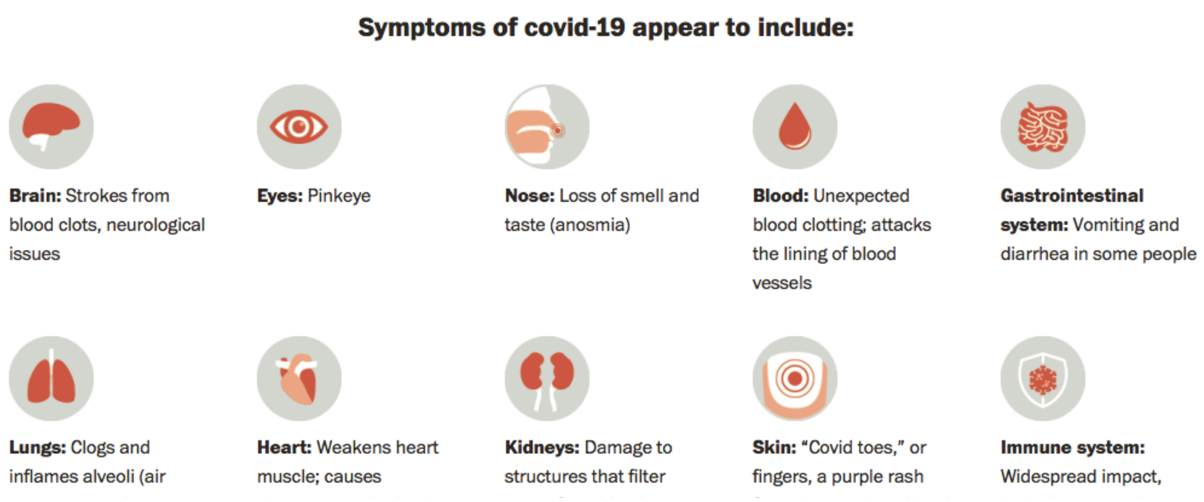
> *Liberatory Harm Reduction* is a philosophy and set of empowerment-based

> practices that teaches us how to accompany each other as we transform the root causes of harm in our lives. We put our values into action using real life strategies to reduce the negative health, legal, and social consequences that result from criminalized and stigmatized life experiences such as drug use, sex, the sex trade, sex work, surviving intimate partner violence, self injury, eating disorders, and any other survival strategies deemed morally or socially unacceptable. Liberatory harm reductionists support each other and our communities without judgment, stigma, or coercion.
>
> And we do not force others to change. We envision a world without racism, capitalism, patriarchy, misogyny, ableism, transphobia, policing, surveillance, and other systems of violence. Liberatory harm reduction is true self determination and total body autonomy.

-Shira Hassan

Making sure you have the facts and necessary context

Before you can teach somebody else what's going on, it's important to make sure you understand the thing you're trying to explain. There's so much misinformation and propaganda about Covid, our understanding of the virus keeps evolving (and is still very incomplete). This is a very, very complicated situation for so many reasons.


Symptoms of covid-19 appear to include:
Brain: Strokes from blood clots, neurological issues
Eyes: Pinkeye
Nose: Loss of smell and taste (anosmia)
Blood: Unexpected blood clotting; attacks the lining of blood vessels
Gastrointestinal system: Vomiting and diarrhea in some people
Lungs: Clogs and inflames alveoli (air
Heart: Weakens heart muscle; causes
Kidneys: Damage to structures that filter
Skin: "Covid toes," or fingers, a purple rash
Immune system: Widespread impact,

sacs), hampering breathing; pulmonary embolism from breakaway blood clots and microclots	dangerous arrhythmias and heart attacks due to small clots	waste from blood; patients often require dialysis	from the attack on blood vessels	including overactive immune response that attacks healthy tissue

If your understanding of the current moment is that 'people are just behaving really selfishly / irrationally, and that's why we're in this situation!' then you're framing a systemic problem in terms of individual bad behavior, and this is inaccurate too. We really, really recommend reading or watching some of the following resources before trying to tackle misinformation around Covid or unpack propaganda with someone else:

1. "Let Them Eat Plague" There is a reason we link this document dozens of times throughout this guide. It's an extremely comprehensive analysis of the pandemic and how we got here. It's a bit academic, but it is very thorough and worth reading.

2. Science communicator Lola Germsmade a fantastic video essay about Long Covid, which explains what Covid does to the body and why so many doctors are still so misinformed. It's essential viewing, and its extensive list of sourcesis a great place to learn more about everything discussed in our own doc.

3. This (Alberta) website is a great resource. It has videos, toolkits, mask resources, air quality resources, opinion pieces from medical experts, and other educational materials.

4. Covid Isn't Over Pt. I and Covid Isn't Over Pt. II by Central Jersey DSA (Slides available here)

5. Safer In-Person Gatherings by The People's CDC

6. What's Up With Covid and How to Protect Yourself: 2024 Edition by Hazel Newlevant. A fantastic illustrated zine resource that's great for sharing. This cc all the most crucial info about transmission, Long Covid, and mitigations. Send this

one to your friends.

Health and safety

Taking care of you

(Borrowed heavily from this document.)

This is going to be *hard*. You are doing this work in the middle of a raging pandemic, so you absolutely need to take care of yourself and honor your limits.

- **Are you ready?** You might be too mad or too sad to have this conversation right now. That's OK. Don't try to have an open and vulnerable conversation at a time when you aren't emotionally OK enough to handle it. You risk creating deeper division instead of moving towards your goals. Connect with your loved one over other topics and mutual values until you're ready to talk about Covid.

- **Find a buddy.** Is there someone in your life who can be ready to receive a rage-text-storm from you after? Someone who can talk on the phone afterward? Get that person in place before you go into this hard conversation.

- **Eat first.** Don't go in hangry (or cold, or overheating)! Take care of your basic needs first.

- **Remember yourself.** If you have any marginalized identity at all (especially true for disabled people), this conversation *will* hurt personally. You're allowed to take c of you. You're allowed to tap out of the conversation, take breaks, or set boundaries.

boundaries.

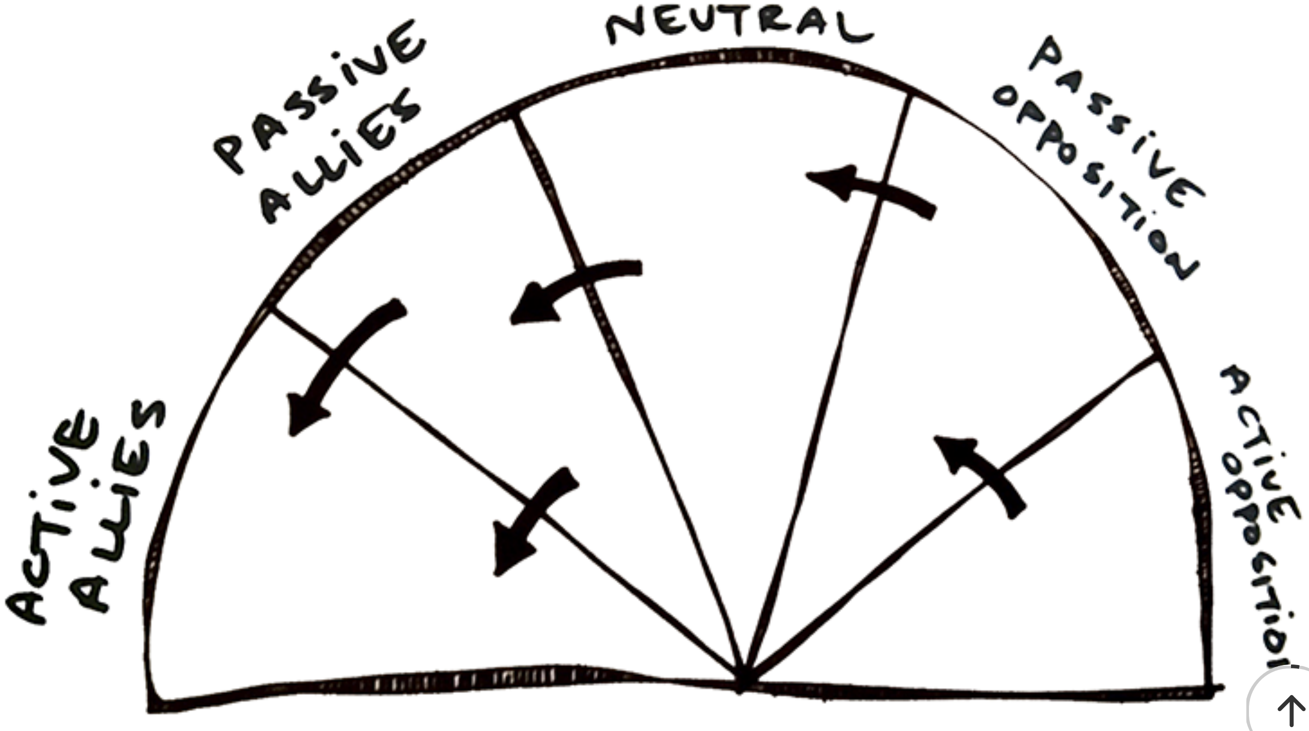
Navigating the conversation

Here are some general principles for having these conversations with your loved ones. Remember to start by acknowledging the things they are doing right (no matter how small), reminding them that you care about them and love them, and establishing trust and safety however you can. This really, really helps.

The spectrum of allies

This will not be a one-off conversation.

People are not going to change overnight. Be ready for a series of hard conversations. Make space for people to move into. Remember the spectrum of allies:


NEUTRAL
PASSIVE ALLIES
PASSIVE OPPOSITION
ACTIVE ALLIES
ACTIVE OPPOSITION

You need to move people along from where they are now, not where you think they should be. Can you get someone who would glare at a mask-wearing person in the store to consider why they should stop doing that? Can you get someone who swears they aren't sick with Covid, just a bad cold, to take a rapid test and wear a mask or stay home entirely? Can you get someone who won't stop going to nightclubs to at least wear a mask when they're at the pharmacy, where sick people have to go? Remember: you climb a staircase one step at a time, not by jumping all the way to the top.

If possible, talk one-on-one.

Face-to-face is hard right now. But seeing one another helps. Can you find a way to safely see them in-person outdoors? Can you video chat on a service you know works for both of you?

Try to avoid jargon / speak the same language

Ask yourself: who am I talking to? Consider your language, and consider how it might come across to someone else. Don't talk down to them but try your best to use terms and ideas this person will be likely to understand. Try to approach them as you would approach a friend. Generosity goes a long way. It's really, really important to avoid giving speeches or talking at them—remember, this person also has knowledge to offer you, too! It's so important to take pauses and check in with them; questions go a long way in helping. A general rule of thumb is that it doesn't hurt to avoid jargon, and try to explain things in your own words. Political and scientific terminology (especially complex terms that have multiple concepts baked into them) can be alienating or confusing.

For example, in order for someone to understand what "post-acute sequelae of Long Covid" means they have to first know 1) what sequelae are, 2) what "post-acute" / "acute" means, 3) what Long Covid is. It's better to try to explain concepts in straightforward terms; you're making the same argument, either way—but you're less likely to alienate your friend if you sound like a friend and not a scientist teaching a class.

Try to avoid lecturing and try your best not to get heated

People don't want to be yelled at. Your anger is valid, and worth expressing, and absolutely justified. All of us writing this are frequently very angry about all of this and having to advocate nonstop for our right to exist! But yelling will most often cause someone else to shut down, and can even be verbally abusive. If you are serious about using conversations for good, it is best to avoid yelling, name calling, generalizations, etc.. Though it is always OK to express your hurt, anger, and frustration in other ways.

📝 We are all about righteous anger, and please do not think we are trying to police your tone. You are a human being and you are allowed to show up as your messy, angry self. But people are more receptive to gentleness, and it is often possible to be very angry while staying gentle.

> Be ruthless with systems, be kind to people.

-Michael Brooks

> Each of us is precious. We, together, must break every cycle that makes us forget this.

-adrienne maree brown

General tips

- **Start from inquiry**. Ask questions. Find out why (and when) they stopped taking precautions or why they are skeptical about vaccines / masks. Don't assume you precautions or why they are skeptical about vaccines / masks. Don't assume you know! Try to understand what exactly they believe and why. Remember: there has been SO MUCH propaganda and outright lying.

- **Let them know where you agree**. Find the most basic thing that you agree on, let them know you agree, and add a caveat. If they say, "I wore a mask and stayed home for a full year! Why should I keep having to do it now?" You can say, "It's really good you did that. I agree that you sacrificed a lot and that wearing a mask is getting harder due to social pressure. What were the reasons you wore a mask when you did?"

- **Find common points of shared experience**. Scaffolding to support the conversation's more sensitive ground is really important. Going right for the hardest part is risky. So try to build up to it by establishing common ground. The truth is, there are many common areas of frustration, between misleading and confusing guidance from our leaders, being forced back into unsafe working conditions, and the pain and grief of everything we're living through together. We can find these common points and use them to build bridges. Some other examples are: the lack of access to paid sick days, travel delays due to constantly sick staff, the ridiculous cost of living, the impossibility of finding up-to-date / accurate Covid information, etc. Find your own and find a way to convey that you share some concerns.

- **Engage their values, not their positions**. Values are things like: "Caring for the elderly and sick is important." Positions are things like: "Biden's Covid response is good / bad." If you can engage on the level of values, you can build a frame to talk about positions in the future.

- **Start with feelings and stories, not facts**. You're probably operating from a *very* different set of facts than your loved one. Fighting them about the details of what they're wrong about is unlikely to actually change their minds (at least not until they've had time to consider these things on their own). Talk about how you feel ("I'm scared of losing my ability to work if I get Long Covid because I already have a chronic condition") and stories from your friends ("My friends keep their playdat safer by testing beforehand and meeting up outdoors").

    - **This means affirming their feelings, too**. Let them know you hear their fears and take them seriously. They're scared of being the only person in a mask at their school? Talk to them about why. Maybe they're afraid of losing their job if they are the only person masking; that's a valid fear.

    - **Share your own stories of changing your mind about mitigations**. Be ready with some stories of times you changed your mind. Example: "I stopped masking after my booster shot because I thought it protected me from getting Covid or transmitting the virus. But then I talked to some people who got Long Covid even after getting vaccinated, and I realized now isn't the time to let my guard down."

- **Use humor if you can and acknowledge the absurdities**. This is a tricky one, because humor can go horribly wrong too. But humor over common experiences of unfairness, absurdity, and sheer ridiculous situations can help break up the tension if it is reaching too much of a tipping point. NOTE: please don't punch down! Sarcasm can be really corrosive, also.

- **Notice where they identify confusion**. This is NOT about finding where you think their position is ideologically inconsistent. This is about noticing where they sound unsure or conflicted. For example, they might say something like: "I really think we need to go back to normal, but my son says half of his classmates are out sick every week and I can't miss more workdays." Encourage them to consider that contradiction that already exists within them.

- **Take breaks**. Run to the bathroom and text a friend, if you find yourself getting upset. Get a glass of water. Make space if they're getting emotional, too. Try to show them that you are willing to care for them, even if you disagree with the choices they are making.

- **Invite them to try something new**. Be ready with a few actions they can take that you think might be just on the edge of their comfort zones. Can you get them to commit to masking when they're in the grocery store or on public transit? Can you get them to sit on the restaurant patio when they go out to eat? Can you get them to commit to reading an article? Even if the conversation doesn't go well, you can try saying things like "Well, dad, just for me, can you just wear a mask when you're in places where sick people have to go?" or "Can you at least read this article and tell me what you think?"

- **Be there with them**. Make sure you let them know that the conversation isn't over and they can reach out to you if they want to talk more about what you've said.

- **Give them space**. Let them marinate on what you're telling them. This isn't going to happen overnight.

Affinity groups

If there are vulnerable and oppressed groups that the person you're talking with has an affinity with, invite them to see how wearing a mask is a crucial step toward supporting that community, and share how Covid is affecting that group in particular (see our Affinity group resources section). If the people you're talking to are part of an oppressed group themselves, it's likely that they already understand many of the ways in which the government has let their communities down before. Remember: our struggles are all linked, and the point of considering affinity groups is not for sympathy or charity but for solidarity and connectedness.

> If you have come here to help me, you are wasting your time. But if you have come because your liberation is bound up with mine, then let us work together.

-Aboriginal activist group, QLD Australia (1970s)

> There is no such thing as a single-issue struggle because we do not live single-issue lives.

-Audre Lorde

We need to move away from framing our decision to mask as doing so mainly out of charity for "the most vulnerable." Framing Covid as something that only affects the sick has led to where we are right now. The policy decisions that work to normalize Covid and downplay its risk to the working class benefit from the pre-existing political and economic conditions that have long been used to control working people. These are intentionally designed policies that serve to utilize the disabled population as a threat to control and disempower the working class.

> “Public policy that equates disablement with poverty means that becoming disabled (a nonworker) translates into a life of financial hardship, whether one has public assistance or not, and generates a very realistic fear in workers for becoming disabled”

> “If workers were provided with a federal social safety net that adequately protected them through unemployment, sickness, disability, and old age, then business would have less control over the workforce because labor would gain a stronger position… Business retains its power over the working class through a fear of destitution that would be weakened if the safety net were to actually become safe.”

-Marta Russell, “Marxism and Disability,” as referenced in this article

So of course, in a society that equates medical aids with disability and illness, it is easy to consider mask wearing and other Covid precautions as something that is only f the “vulnerable” or disabled, a category that is understandably feared by the working class due to the political and economic realities of being disabled under a system that uses your suffering for leverage and profit.

We are *all* at risk from Covid. And we all deserve freedom from that risk.

The framing of risk as exclusive to vulnerable people leverages pre-existing political and economic pressures around disability to allow people to continue to see themselves as separate from those considered “at-risk”, “vulnerable” or disabled and gain a false feeling of safety. It has never been true that only the “sick and elderly” are at risk—and it wouldn’t be okay to abandon them if they were—but many people still believe this lie in order to feel safe.

Feeling safe and being safe are not the same thing.

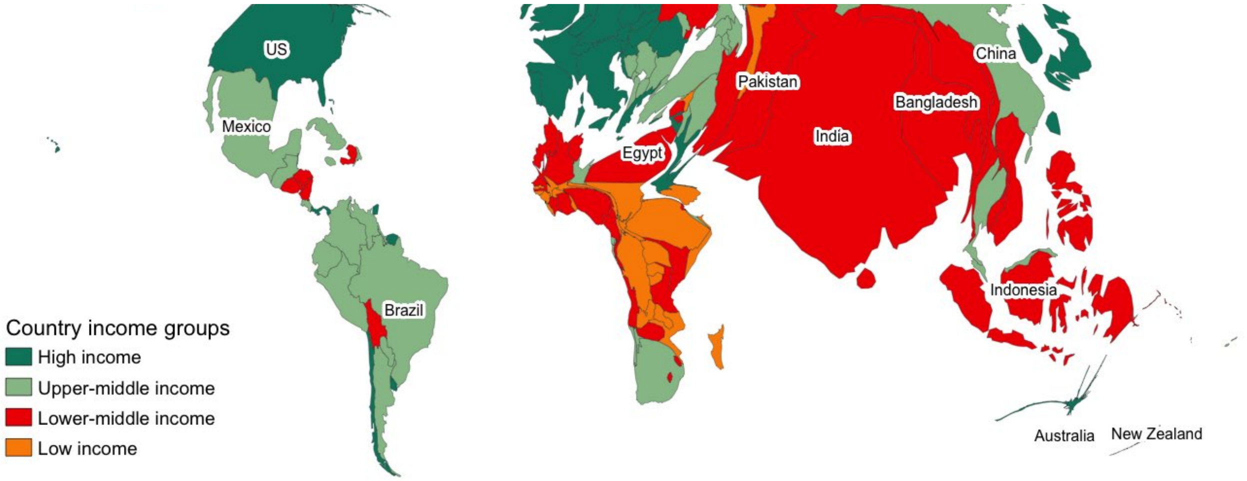
Safety comes from taking actions that protect the whole community. Covid continues to wreak havoc on the global population—and the death toll is much higher than original estimates suggested. According to *The Economist* in November of 2022:

> Although the official number of deaths caused by covid-19 is now 7m, our single best estimate is that the actual toll is 27.4m people. We find that there is a 95% chance that the true value lies between 18.2m and 33.5m additional deaths.

Source: *The Economist*

The death toll continues to climb. Many millions more have Long Covid as a result of these governmental failures. The policy choices that have been put in place have never been about protecting our safety, and they have never been about protecting our collective interests. Once again, it has been about profit over people.

The global excess mortality burden
Land mass = 22 million cumulative excess deaths globally
Russia



Source: The Economist; WPP. Updated: 2023-05-05. Note: Gastner-Seguy-More cartogram based on WGS84 projection. Made with cartogramR and mapsf. Excess death numbers are mid-point estimates derived from The Economist's excess death model. For viz purposes, countries with negative estimates are not shown. The 10 countries with the largest excess death count are labeled. Australia and New Zealand are also labeled to help locate them on the cartogram.

Transmission data

If you can, familiarize yourself with your local transmission data, how that data is currently being recorded, and the pattern over time. Governments have been cutting back on Covid reporting and research for a long time now. This means that we have less and less comprehensive data sources, especially real-time sources. But that doesn't mean we're completely in the dark; there's still many people analyzing the clues and information we do have available. Where there is poor transmission data collection, you can look for analysis from actuaries, wastewater testing, death certificate info, and excess death data for information on how Covid has affected where you live.

Data is even more sparse now than it was when we wrote the first version of this document, but there may still be updated resources for your area. Look to local advocacy groups as a starting point. For example, in Canada there is the COVID-19 Resources Canada, which provides bi-weekly hazard indexes for each province and territory. Many Canadian Covid advocacy groups share and use this data to help better understand what is happening in their area.

Other resources to find available data for various countries and regions:

- USA: National Wastewater Surveillance System (data/charts can be found by clicking here)

- Australia: COVID Live

- UK: Deaths registered weekly in England and Wales, provisional (Office for National Statistics), “Winter Coronavirus (COVID-19) Infection Study, England and Scotland” (Office for National Statistics)

- Netherlands: Virus particles in wastewater” (RIVM)

- Aotearoa New Zealand: COVID-19: Current cases

- Know of an organization still collecting and sharing this data in a country that isn’t on this list? Email us: maskupwithus at gmail dot com.

Affinity group resources

What kind of things does the person you’re talking to care about? What communities do they have connections to? Find out, research the impact that Covid has, and talk to them about it.

Here’s some examples:

- BIPOC are disproportionately affected by Covid.

- So are members of the 2SLGBTQIA+ community.

- If they're a feminist (or a woman, or someone who knows and loves women), they should know that women are at a greater risk for developing Long Covid.

- Disabled and chronically ill people are being confined to their homes indefinitely and left to die.

- Poor people and homeless people are extremely vulnerable to dying from Covid.

- People in prisons are extremely vulnerable to dying from Covid.

- People in nursing homes or institutional facilities are extremely vulnerable to dying from Covid.

- Infants and pregnant people are very at-risk (worth reminding people that babies can't wear masks and are greatly at risk from Covid and other respiratory diseases).

- People trying to get pregnant should know that Covid has been linked to infertility.

- Working class people are getting sick repeatedly and missing work (without access to healthcare or paid sick leave) and are forcibly exposed to Covid if they have to work in-person. Many workplaces have had outbreaks of Covid.

- Musicians are getting Long Covid because of having to perform in front of so many unmasked crowds. Here's a massive Twitter thread showing all of the tours that have been canceled or postponed due to artists being sick.

- Pet owners should know that their pets can get sick with Covid.

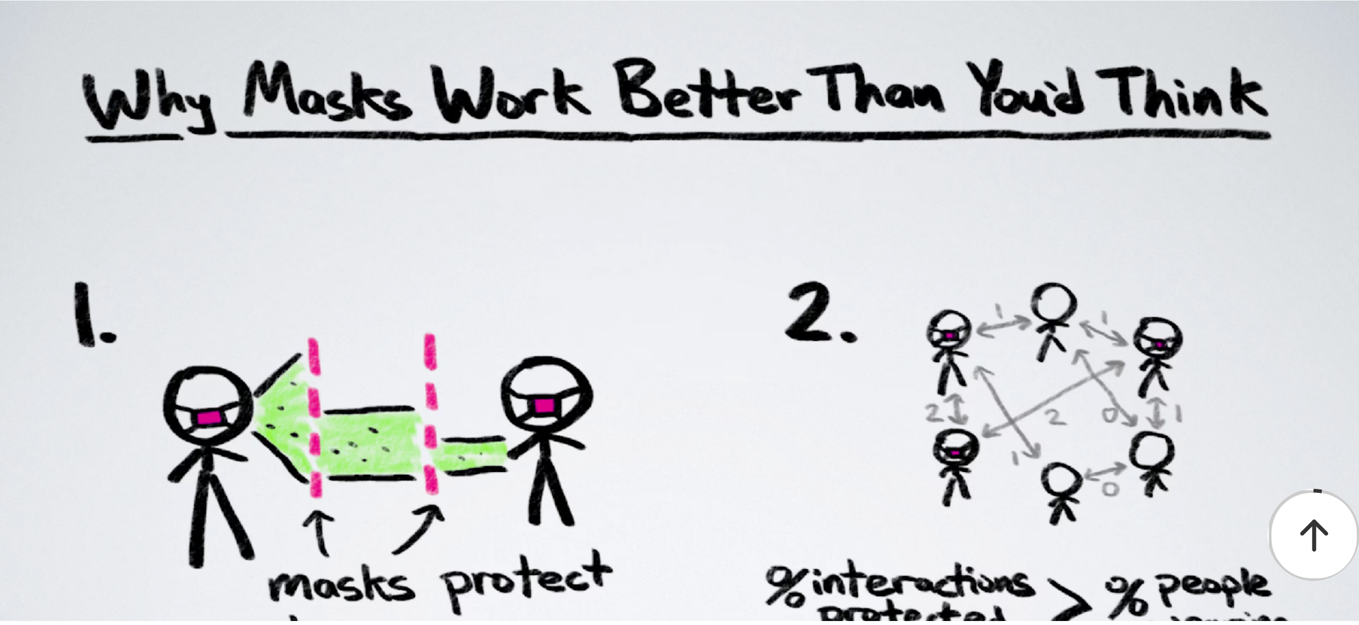
- Animals and wildlife can get Covid (and Long Covid). Covid is very much an environmental issue.

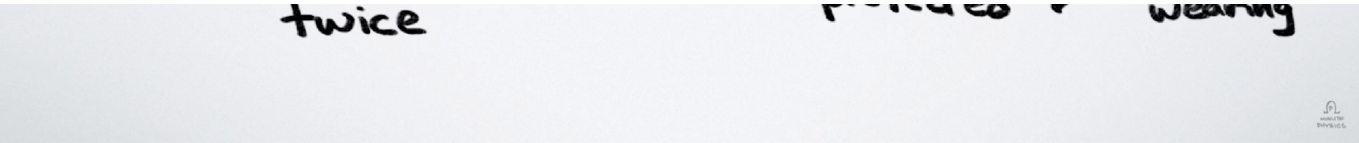
Side note from a former waitress:

> I've heard a lot of people justify not masking around waitstaff because the workers themselves are unmasked. What they don't realize sometimes is that these workers may be penalized at work for wearing a mask or outright forbidden from doing so. It's worth pointing this out to people. When I worked in restaurants, I was told I'd be fired if I didn't wear makeup every shift, and restaurant owners know that many of their customers hate seeing masks.

Mask up

Wearing a mask is simple, but the topic is complicated. Masks have been politicized. Hospital shortages in the past once meant that people were directly discouraged from buying and wearing them. Misinformation about masks is everywhere. And on top of all of that, there are so many different types of masks with varying degrees of effectiveness (which is also determined by whether or not they fit). But masks remain one of the most effective and accessible tools we have to reduce the transmission of Covid. And they might work even better than you think!





- Video: "Why Masks Work BETTER Than You Think"
- Explorable essay: "The Multiplicative Power Of Masks"

Masking, like much of public health, is a collective action and a shared responsibility. In societies where collective masking isn't established, people often don't want to stand out and wear a mask. But many, many people would wear masks if they knew most people would also be wearing them; in this case, people can get superior protection and they don't risk standing out.

Our governments have given confusing messaging around masking, even outright discouraging it. We believe there should be widespread endorsement by our governments, pro-masking campaigns and education, and free and accessible availability of quality masks. We still hope these are actions taken in the future, but the failure of governments have left it up to us. The good news is that every person that masks has an impact on reducing transmission that is larger than themselves. The more interactions that contain masks, the better! So let's do what we can to encourage masking and make it accessible. Every mask worn makes an impact! Masks work!

Navigating common misconceptions

the pandemic is NOT over!!
PREMIER
PREMIER
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uaranteed by
d Housekeeping

Responding to common objections without (outward) judgement

But what about specific arguments? How can you respond to the specific things that people say to you without losing your temper? Here are some ideas and sample scripts, along with suggestions for following up in further conversations (plus additional resources where you can learn more).

📝A note on conversational approach:

In this document (and when we're talking to others), we are often starting from a point of taking people at their word. Of course, many people are making flimsy excuses. But there are many reasons we take this conversational approach, and none of them are intended to accept what others are saying uncritically.

Why go this route? Well, if someone says they aren't masking because masks give them acne, and you respond by offering to troubleshoot their acne problem or find them a better mask, they will then have to come up with another (likely truer) reason for why they stopped wearing a mask. Or, they might feel uncomfortable in the face of their own lie, which is a productive sort of discomfort that can sometimes lead to positive change.

You also might find that some people haven't been given a chance to really think about and discuss these topics, and by talking about it openly, hearing them out and finding shared values, they may come to their own conclusions and end up asking you what they should do.

Asking genuine questions and offering pragmatic solutions is one way we have actually gotten people in our lives to start wearing masks again. And angry accusations —while often completely deserved and sometimes unavoidable—frequently lead others to shut down.

Remember: We need more people to wear masks.

In our view, taking others at their word in the beginning is an effective way of disarming defensiveness and getting to the real root of why someone stopped wearing masks, but we are not suggesting that this is the only way to approach these conversations. As with all things, your mileage may vary. No, facial acne is not a good reason to stop wearing masks, and we want to make it abundantly clear that's not what we're saying or arguing! We are being strategic and empathetic as much as possible, because telling someone “Hey, you're full of shit” might sometimes be the move, but it can also lead someone to exit the conversation or the relationship altogether, or just emotionally tune out (while the harm continues). And again: most people do not know what we know about Covid.

It's extremely understandable to feel betrayed and upset at individuals, but the primary focus and blame should always be on the systems and people in power, who bear the brunt of the responsibility for this disaster.

Masks

📝 this document uses N95 as a stand-in for a respirator that has minimal inward leakage. (More on this shortly.) Substitute your own local variant (where applicable) as needed.

“Masks don’t work” / “masks aren’t safe” / “masks are dangerous.”

There has been a lot of confusing and bad guidance going around about masks, and I don’t blame you for thinking that. A lot of people have been claiming masks don’t work. But those people either A. don’t know what they’re talking about, or B. they’re just trying to minimize the risk to make people return to business as usual, most likely so we’ll all go back to work and not disrupt the economy too much. If someone is telling you this, it’s because they’re selling something (and selling the illusion of normal counts as selling something!) Why do you think masks don’t work?

Listen to what they say. They will probably reference some article they read or point to a high-profile ‘expert’.

It’s scary that even some trusted experts have been loud and wrong about this! The truth is, the op-ed that went viral about masks not working was based on flawed research, according to the vast majority of scientists who have responded to it. Here’s an article that explains why (in a really straightforward way). Can I share it with you?

The truth is, N95 and similar masks are really, really good at protecting you from Covid, especially if they’re fitted. Surgical masks are better than nothing but way, way less effective. And masks only work as well as you wear them—if there’s big gaps in your mask, they can’t work the way they were designed to. If you want, I can help you find a good mask that fits you!

Next steps

Plus, lots of businesses rely on people doing things in person. That means that people choosing to limit their in-person activities would impact the economy, and that's the one thing all of our political leaders and our bosses are always going to do everything in their power to avoid. Masks remind people that the pandemic is not over, and that's why a lot of companies and leaders are urging people to throw caution to the wind and stop wearing masks; they want us to live like it's 2019, because they need to keep making money.

Also, we know masks work, because people used them all the time even before the pandemic! Firefighters wear masks to protect themselves from smoke inhalation. Painters wear masks to avoid inhaling dangerous particles and chemicals. People in Japan have been wearing masks during flu season for years to prevent people from getting sick. And they are a key piece of PPE (personal protective equipment) for many industries. We wouldn't need masks in all those scenarios if masks didn't work to filter the air. Would you be interested in me sharing some articles that helped me trust that wearing a mask was safe?

Further reading

- Here's a scientist explaining why masks are safe for kids to wear (and explaining why that JAMA Pediatrics study was very flawed).

- Here's an article explaining the engineering science that shows how masks work and how millions of people, across occupations, have been trusting their lives to masks for decades (it also explains why that Cochrane review was very flawed).

"Masks do work, but cloth masks are fine." / "I wear a cloth mask!"

- It's great that you're trying to protect yourself and the people around you! But because we now know that Covid travels like smoke through the air, because there's been more research since the pandemic started, and because Covid is way more contagious than it used to be, we now know that sadly, cloth masks don't offer very much protection at all.

- N95s provide the best protection against Covid, and they work against all variants.

- There's vast differences in inward mask leakage between N95s and other masks (and remember: leakage is what we're trying to avoid):
  - Fabric 70%
  - Surgical 44.2%
  - KN95 16.1%
  - N95: only 0.6% (this is why they're the safest!)

- It takes only a very tiny amount of viral aerosol to cause a Covid infection, so N95s are the best masks for preventing infections, because they filter air the best and offer the best seal.

- However, there are a lot of other considerations. If someone is opposed to wearing a head strap N95 but is willing to wear a bifold KN95 mask, they are far safer (and the people around them are safer) with this person wearing an imperfect mask than this person not wearing a mask at all. Remember: the goal is harm reduction.

- Adding a head strap (like this one) to KN95 earloop masks can make them fit m like an N95. It helps create a tighter seal, and also takes pressure off the ears.

If they're still wearing cloth masks:

- Offer to help them find a better mask (N95, KN95, elastomeric)
- ⚠️: Please let them know that double masking (or decorating the front) with N95s is NOT RECOMMENDED AND NOT SAFE:
- N95s work because of their electrostatic charge, which can be dispelled by moisture or any additives to the front of the mask.
- Layering surgical masks on top of N95 is not recommended, because doing so can cause leaks to happen(however, some hospitals are requiring people to do so).
- Be sure to thank them for doing their best to protect themselves and the people around them!

"Masks are uncomfortable" / "I can't breathe in a mask" / "Masks make my skin break out" / "Masks fog up my glasses so I can't see" / etc

Start by asking questions about which masks they've tried! A lot of people have only ever worn blue surgical masks, or the kind of cloth mask that sits directly across your lips (AWFUL). Try to figure out which masks they've tried and what the issue is. Approach their concern as genuine and offer them actual solutions to see if this is just a deflection from their real reason. Some people really might not realize that there are ways to stop their skin from breaking out/glasses from fogging up/masks from suffocating them!

If they don't wear masks because masks aren't comfortable:

Some masks are really uncomfortable! I can't stand wearing cloth masks against my mouth. But I've found masks that I can wear for hours, and I'd rather be slightly uncomfortable than risk my long-term health or get someone sick. Living with chronic illness means having to deal with pain every single day, and that's why I'm wearing a mask right now. What if I found you a more comfortable mask so you can stay safe? Are you willing to at least try one of mine?

Troubleshooting:

- If you have extra masks, offer them some of your most comfortable ones to try.
- Offer to help them find masks that are comfortable (check local mutual aid groups in your city, free health clinics, local libraries, etc.)
- See also: "I can't afford high-quality masks" section below.
- If they're claustrophobic and can only handle the most extra lightweight mask, here's a Twitter thread filled with recommendations from people who struggle to wear masks for long periods, including:
  - Kimtech™ N95 Pouch Respirator
  - Gerson duckbill N95s
  - Softseal masks

If they don't wear masks because their glasses are always fogging up:

- Here's a guide that troubleshoots foggy glasses from masks
- Help them make sure their mask fits and has a nosewire
- Offer to give them some anti-fog lens wipes (or lens cleaner)

If they don't wear masks because their skin is breaking out:

- Using antiseptic mouthwash before putting on your mask might actually help prevent breakouts
- Skipping makeup and sunscreen under masks helps a lot
- Best practice is to avoid occlusive skin care, like rich moisturisers, during the day when wearing a mask so the occlusive environment isn't amplified.
- Make sure they're wearing a clean mask
- Remind them that pimple patches can be worn under masks (no one will see them!)
- Washing your face before and after putting on a mask seems to help a lot!
- Offer to help them find a more breathable mask

- 📝 Acne can be emotionally difficult to deal with and physically painful. It can mess with self esteem and negatively affect mental health, or exacerbate skin picking compulsions, etc. So while it's obviously not OK to stop masking because of acne, chalking someone else's skin concerns up to vanity (or mocking them for having this fear) is unhelpfully dismissive and won't encourage them to mask. Try your best to treat their concerns as valid while reminding them that Covid can also cause severe skin issues and causes premature aging to not just our skin, but to our entire body.

If they don't wear masks because they don't want to shave their beard:

- Send them this video, which has instructions on how to wear a beard cover under their masks: "Beard Cover Technique—Elastic Band"

"I can't find a mask that fits my face!"

- N95 masks are the American standard and were primarily designed to fit the faces of white men working in industrial jobs, so it's not uncommon to find difficulty getting a good seal. The best mask is one that fits. Try a KN95 (Chinese standard) or KF94 (South Korean standard) for a different fit and read this for further information.

- It's possible to staple 3M Aura masks at the chin (as demonstrated by Alex here) for a tighter fit, and this hack has successfully passed fit tests.

- If you're an adult with a smaller face, a good bifold option is the M95 mask by

Lutema

- Mask braces can be a good option to ensure a tighter fit

- Check out the excellent videos made by Lola Germs to learn more about mask fit!

- Some companies make variety packs of masks so you can try a bunch and see what works for you

- Medical tape can help secure your mask to your face and ensure a good seal

- Adhesive foam can be bought online and applied to the inside of your mask to improve the fit

- IMPORTANT GUIDE TO FITTING BIFOLD MASKS HERE

- Make sure they know how to correctly wear a respirator! This link has a guide.

N95 sizing tips

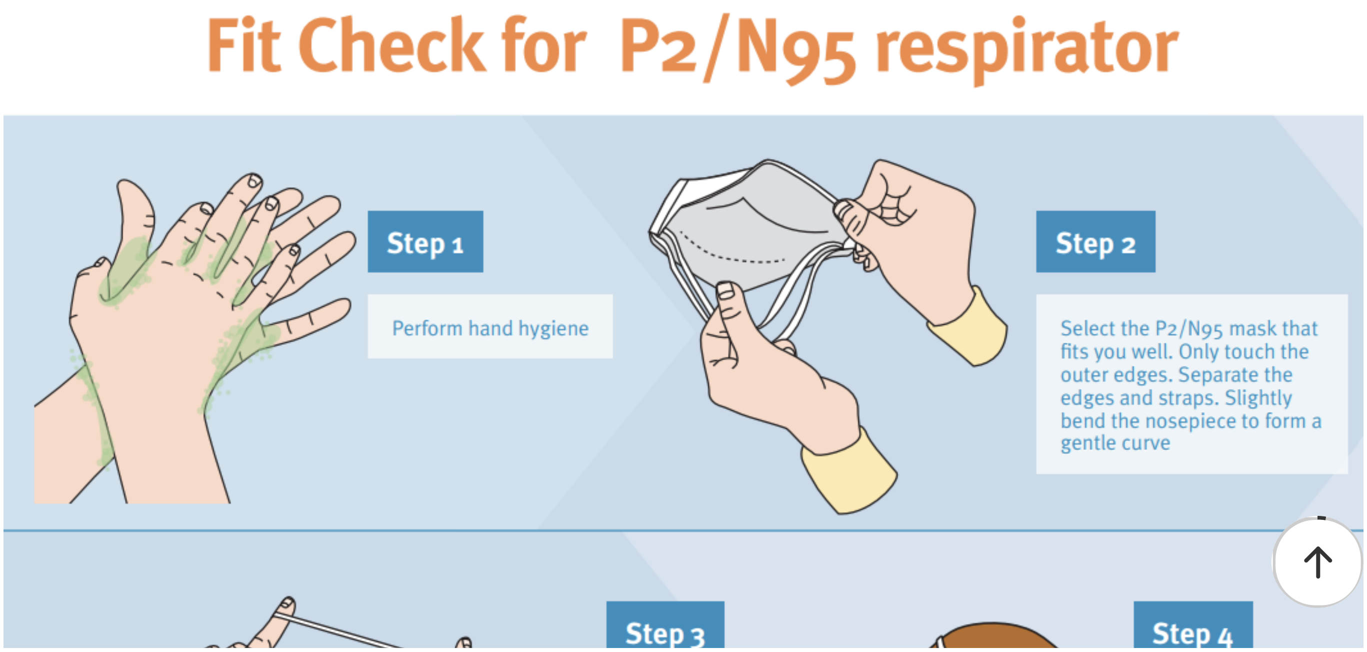
- 3M Auras are a comfortable, widely-available respirator option, and they fit most people's faces well. Start by trying these. If the 3M Aura is too big, try the CAN99, then the VFlex small. If the 3M Aura is too small, we recommend the VFlex regular.

"I don't want to wear a mask because I'm wearing a formal outfit / I don't want to mask because it's not stylish."

Fashionable mask options exist! If you're looking for a fancier mask option, check these out:

- masklab makes gorgeous masks (in adult and children's sizes)
- Private Stock Labs sells fancy KN95s in a wide range of colors (and in multiple sizes)
- wellbefore sells KN95s (with nose foam!) in a wide range of colors
- Benehal and BNX both sell black head strap N95s
- Canada Strong Masks sells a wide variety of masks in different colors

  Masks are an extra accessory, and you can absolutely find one that works with your outfit!


Fit Check for P2/N95 respirator

Step 1

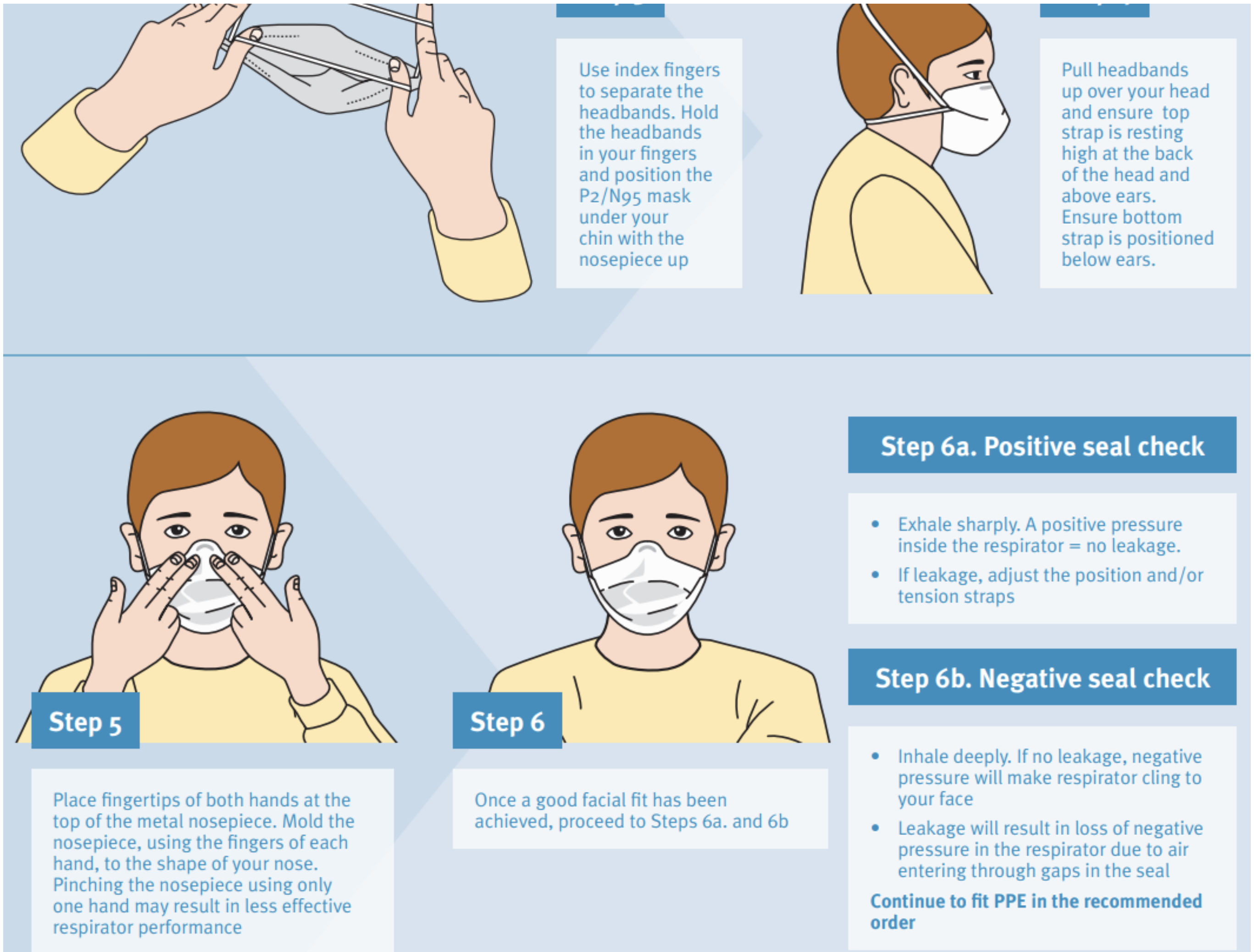
Perform hand hygiene

Step 2

Select the P2/N95 mask that fits you well. Only touch the outer edges. Separate the edges and straps. Slightly bend the nosepiece to form a gentle curve

Step 3

Step 4



Use index fingers to separate the headbands. Hold the headbands in your fingers and position the P2/N95 mask under your chin with the nosepiece up

Pull headbands up over your head and ensure top strap is resting high at the back of the head and above ears. Ensure bottom strap is positioned below ears.

Step 5

Place fingertips of both hands at the top of the metal nosepiece. Mold the nosepiece, using the fingers of each hand, to the shape of your nose. Pinching the nosepiece using only one hand may result in less effective respirator performance

Step 6

Once a good facial fit has been achieved, proceed to Steps 6a. and 6b

Step 6a. Positive seal check

- Exhale sharply. A positive pressure inside the respirator = no leakage.
- If leakage, adjust the position and/or tension straps

Step 6b. Negative seal check

- Inhale deeply. If no leakage, negative pressure will make respirator cling to your face
- Leakage will result in loss of negative pressure in the respirator due to air entering through gaps in the seal

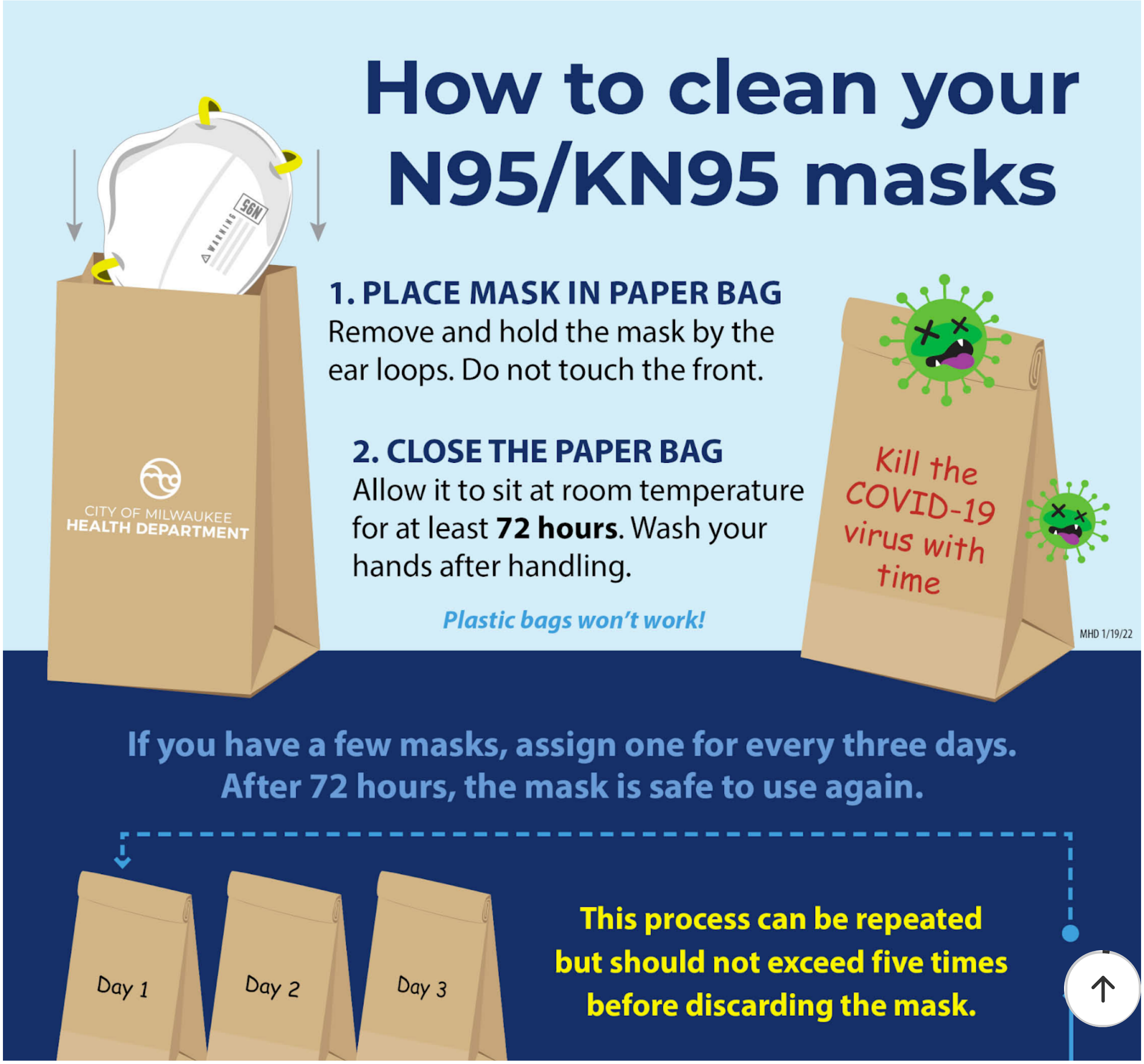
Continue to fit PPE in the recommended order

“I can’t afford high-quality masks.”

First of all, I’m really, really sorry that you are financially struggling. It should not be our responsibility to pay for this PPE. The government can and should be providing us with masks. Fortunately, there are groups providing free masks, and I can try to help you find some. If you want, I can try to help you locate masks in your city.

- Try calling your local free / low-cost health clinic (if that’s an option); some of these places offer masks
- Mask blocs are activist groups popping up across the country, offering free ma

- Check harm reduction orgs in your city as well
- Many retail stores (including grocery stores and hardware stores) stock respirators
- Donate a Mask is a good place to find masks in Canada
- Most N95s can be reworn a few times, and a lot of people don't realize this! We don't throw out our masks after a single wear. We use the paper bag method:



How to clean your N95/KN95 masks

1. PLACE MASK IN PAPER BAG
Remove and hold the mask by the ear loops. Do not touch the front.

2. CLOSE THE PAPER BAG
Allow it to sit at room temperature for at least **72 hours**. Wash your hands after handling.

Plastic bags won't work!

MHD 1/19/22

If you have a few masks, assign one for every three days. After 72 hours, the mask is safe to use again.

This process can be repeated but should not exceed five times before discarding the mask.

CITY OF MILWAUKEE
HEALTH DEPARTMENT
N95
WARNING
Kill the COVID-19 virus with time
Day 1
Day 2
Day 3

Additional mask considerations

- If someone needs a strapless respirator without metal, ReadiMasks are a great option (and are safe to wear during MRIs)

- A guide to fat friendly face masks

Reality clashes / Not seeing eye to eye

“All you talk about is Covid.” or: anger/hostility toward you, for bringing up the subject

The following reflection comes from Dr. Lisa Iannattone (@lisa_iannattone) and was originally posted as a series of Tweets (16 Jul 23):

> I have experienced the same thing from a few people. Have to gently remind them that if they would call me once in a while instead of only following me on Twitter, they would know that I'm still a full person. A toddler mom. Working full time. New university position. I garden. I cook. I go out and enjoy the world safely every day.

> ‘Covid has taken over your life.’ LOL no. My life is full actually. I don't need to live

> covid denial to experience joy. I actually feel more peace and joy when I allow myself to care about things that matter to me. Some people don't seem to intuitively understand that part.

> There's also a phenomenon of displaced anger from some people that haven't worked through the trauma of the last 3 years. They weirdly direct their anger about the pandemic at me, as if *I'm* covid, instead of working through their feelings about the pandemic in a healthy way. I've literally had to stop people to say 'Hey, it sounds like you're upset about how covid changed a lot of things, but you seem to be directing your anger at *me*? I'm not the virus. None of this is even remotely my fault and I can't fix it for you.

—Dr. Lisa Iannattone, MD

"I couldn't live the way you do and take all those precautions! It's too hard" / "It's not fair that I should have to change my lifestyle. Other people are still eating indoors, so why shouldn't I?"

The following comes from Misha (@MishaCopyninja), who first shared these reflections on Twitter on July 19, 2023:

> I've used HIV as an analogy, not to instill fear in people, but within queer circles it tends to be very effective because most of us know about condoms and PrEP, and PEP, and retrovirals, and viral load etc. etc. And many of us didn't know what it was like before.

> So, from that point of view saying 'I think COVID changed forever the risks of sh
> air, similar to how HIV changed forever the risks of sex.' It's still brutal but our minds

> can go to: OK how do we mitigate, prevent, do harm reduction and what tools do we have, etc.

> And I'm my first case study because honestly I was freaking out 24/7 until my mind landed on that idea. That I don't know how having a sex life was like before, but I managed to have a reasonably safe one, thanks to groups like ACT UP, and it's just a matter of trying and caring.

—Misha (MishaCopyninja)

Individual vs government responsibility

"Nobody's masking anymore"

Lots of people (including me) are still wearing masks! Just because you don't see them doesn't mean they don't exist. One 2023 poll showed that nearly a quarter (21%) of Americans still mask most or all of the time, and about half of Americans (48%) are continuing to mask up in public on at least some occasions. Half of Americans polled said they are taking Covid precautions this winter.

People in large cities, people in other countries, people who shop at the grocery store right when it opens to avoid peak hours, people undergoing cancer treatments: all of these people are wearing masks, but you're not seeing them because you're not going to the same places at the same times. I still wear a mask! Also, the rich and powerful are absolutely still wearing masks and requiring the people around them to mask and test frequently.

Look at how the billionaires at Davos protected themselves from Covid just earlie year. They had tests, masks, high-end air filters, UV filtration, upgraded ventilation, and more, because they know the pandemic isn't over and that Covid is extremely dangerous. They're telling us it's over, because they don't want to pay to make their buildings safer, because they don't want us to stop spending money, and because they don't care about whether we live or die.

"I shouldn't have to wear a mask. It's the government's responsibility to enforce masking / improve ventilation. / This is a systemic problem and the burden shouldn't be put on individuals to do the right thing."

You're right that the government should be doing something! It should not be on each of us as individuals to do the right thing, and we've been left to fend for ourselves as things get worse. But our individual actions do matter, and we can't use the government's lack of a response to justify harming one another. Prioritizing our short-term comfort over our futures is a recipe for disaster. Besides, every chain of transmission that we break is valuable. Preventing another person from getting sick and having to miss work means that the other person won't lose a week of income. That matters. Not everyone has paid sick leave. Not everyone has health insurance. Small actions can make a huge impact on someone else.

As we continue to pretend everything is normal, the virus continues to evolve. The longer we allow ourselves to be led by individualism or to only think of our own needs, the sicker we will all become.

> "Just because the state is not doing its part, doesn't mean we as community members and individuals are absolved of our responsibilities for cultivating collective safety in our everyday interactions."

- ji-youn kim 김지연

Case studies in mitigations for the rich and powerful

The richest and most powerful people in the world are taking zero chances with Covid, and they know the pandemic is not over and that Covid is airborne. Their precautions are extensive and hidden from view. From politicians to the military to musicians, here's some examples of ongoing protections for the rich and powerful:

Billionaires are staying safe! We should too! (#DavosSafe)

"World Economic Forum: Here Are All The Covid-19 Precautions At Davos 2023" by Bruce Y. Lee (*Forbes*):

> …so why is the WEF [World Economic Forum] going through *all of these efforts* when many stores, restaurants, airplanes, trains, Ubers, workplaces, or even health clinics around you don't seem to be doing the same? Is it more about them than you? Or, more specifically, is it about who is attending the WEF than you? Let's see, how might the types of people attending the WEF at Davos be different from you?

> …It's by invitation only. Attendees include several thousand investors, business leaders, political leaders, economists, celebrities, and the like. Founded on January 24, 1971, by German engineer and economist Klaus Schwab, the WEF is a not-for-profit foundation that "engages the foremost political, business, cultural and other leaders of society to shape global, regional and industry agendas," as described by the WEF website…

> So the WEF Davos 2023 is clearly a collection of people who have access to

> resources, connections, and influence that most people don't have.

> Therefore, it is interesting to see the contrast between what's being implemented at the WEF versus what you see in places around you and hear from the political and business leaders.

> While elites take every COVID precaution possible when they meet with each other at the World Economic Forum, they go home and tell us that COVID is no longer a threat, and the pandemic is over. Actions speak louder than words.

> So if you are wondering what to do about Covid-19, maybe you should take a closer look at what political and business leaders are actually doing rather than saying. For example, are those political leaders who are pushing against Covid-19 precautions on public transit actually taking public transit themselves? Are they actually putting themselves at the same risk for getting Covid-19 as every day people? Or are they really doing more to protect themselves? If you don't do what leaders actually do for themselves, you could find yourself in some deep doo-doo.

-"World Economic Forum: Here Are All The Covid-19 Precautions At Davos 2023" by Bruce Y. Lee (*Forbes*)

Politicians

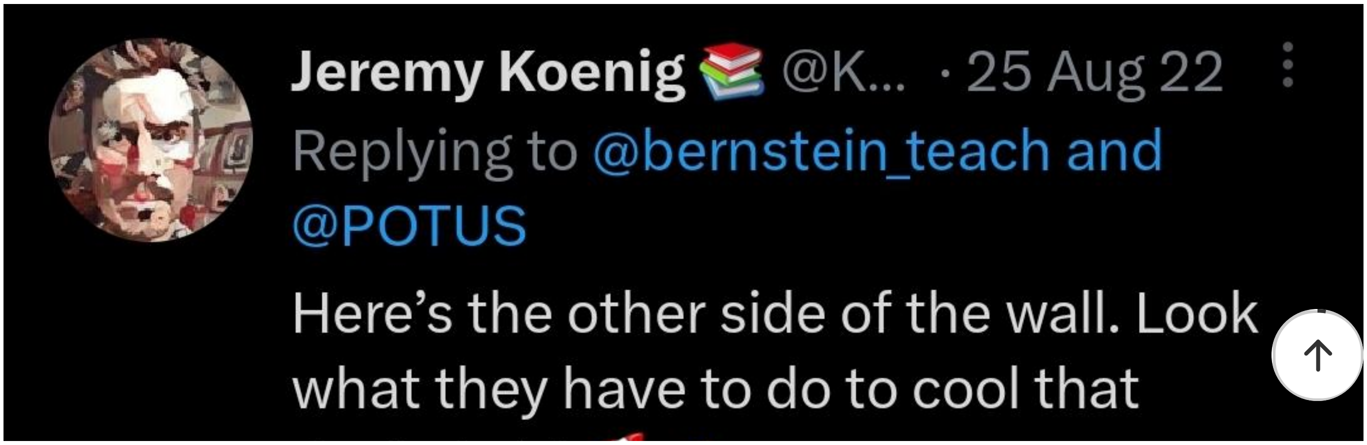
Joe Biden isn't taking his chances with Covid, because he knows it's deadly. When Biden gave a maskless speech last year at a high school, his team literally remove gym windows to rig a (temporary) high-end ventilation setup (see below)! This is n standard event setup; this is an unprecedented level of precaution that was undertaken to keep the president safe. Photos from this event show Joe Biden smiling and maskless; what most people didn't get to see was the extra air conditioners (possibly equipped with HEPA filtration and/or UV).

Here is the link to the original tweet, which shows the view from inside the building as well. Here is a blog post about this story, because some parents wrote about this exact situation and drew these exact same conclusions:

> Friday, August 26, 2022
>
> Biden Brings His Own Ventilation to @mcps High School #CovidisAirborne #CO2

> On Thursday, August 26, 2022, President Joe Biden held a rally in the gym of Richard Montgomery High School in Rockville. Montgomery County is currently in a period of HIGH Covid-19 Transmission with a Positivity Rate of 11.65%. What's a President to do with a potential super spreader event?Why, bring his own ventilation, of course!

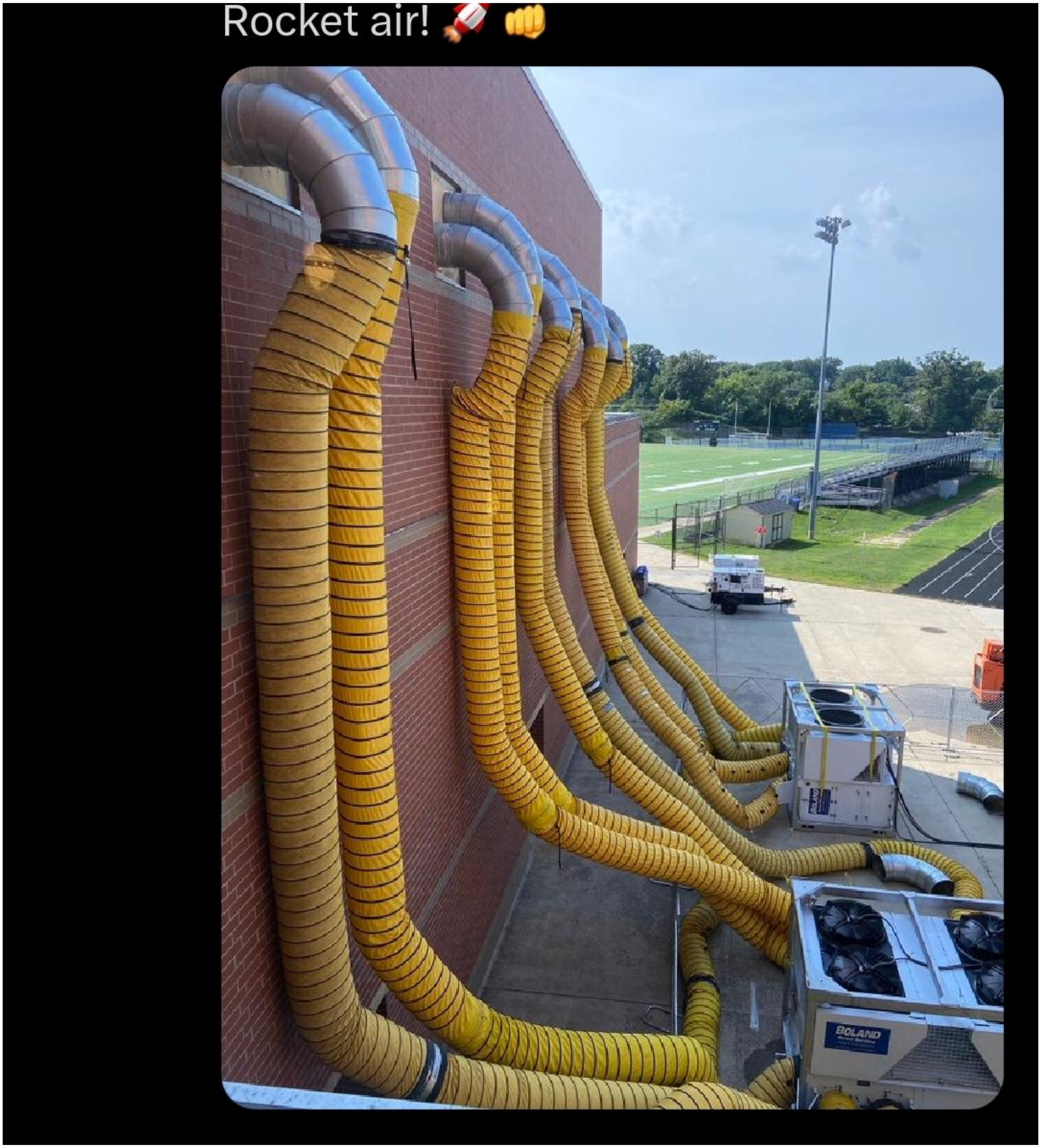
> Take a look at the air handling units that were added to the outside of the Richard Montgomery High School gym for President Biden's rally:



Jeremy Koenig 📚 @K... · 25 Aug 22

Replying to @bernstein_teach and @POTUS

Here's the other side of the wall. Look what they have to do to cool that



Rocket air! 🚀 👊

How do MCPS students that use this gym year round get the same type of ventilation upgrade for their use of this space?

- Parents' Coalition of Montgomery County, Maryland

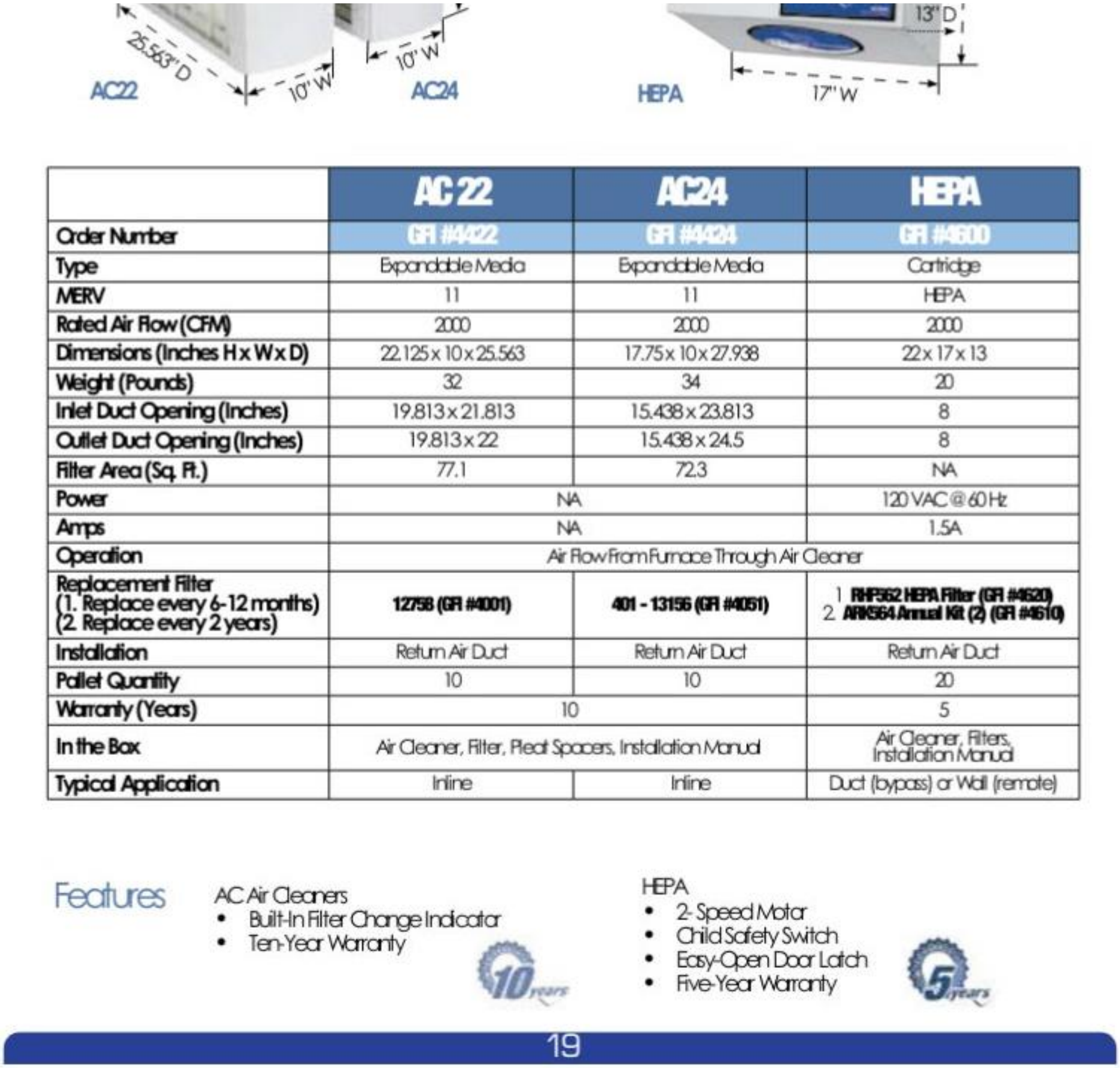
This picture should raise questions and set off alarm bells. Why should Joe Biden tell parents their kids are safe to be maskless in crowded, poorly-ventilated classrooms and gymnasiums during periods of high Covid transmission, when he is well aware that ventilation in these spaces is a dangerous problem? Why should he get clean air, but not your kids?

Further, air conditioners like the ones in these photos can be equipped with HEPA filters (which trap viral particles and make indoor spaces safer as a result). And bringing in lots of fresh outdoor air significantly reduces the concentrations of CO2 indoors, lessening the amount of virus in the air and making the space much safer.

The company whose equipment is pictured has HEPA filtration options available in their online brochure. It's very possible and very likely that Biden's team went with the premium option and added HEPA filtration (the company offers UV light sanitation options as well).

But whether HEPA filters were added on or not (we can't tell from the photo), bringing in so much fresh indoor air made the gym much safer for him while he was at the school...but the White House is not funding upgrades to school ventilation systems, or being transparent about the mitigations undertaken to keep Biden safe at all costs. The parents at Richmond Montgomery were rightly angered by this, and so are we.

Indoor Air Quality & Filtration
Air Cleaners - AC, HEPA
BOLAND Supply
27.938" D
22.125" H
27.3125" H
22" H


25.563"D
10" W
AC22
10" W
AC24
13" D
HEPA
17" W
10 years
5 years
19

	AC 22	AC24	HEPA
Order Number	GFI #4422	GFI #4424	GFI #4600
Type	Expandable Media	Expandable Media	Cartridge
MERV	11	11	HEPA
Rated Air Flow (CFM)	2000	2000	2000
Dimensions (Inches H x W x D)	22.125 x 10 x 25.563	17.75 x 10 x 27.938	22 x 17 x 13
Weight (Pounds)	32	34	20
Inlet Duct Opening (Inches)	19.813 x 21.813	15.438 x 23.813	8
Outlet Duct Opening (Inches)	19.813 x 22	15.438 x 24.5	8
Filter Area (Sq. Ft.)	77.1	72.3	NA
Power	NA		120 VAC @ 60 Hz
Amps	NA		1.5A
Operation	Air Flow From Furnace Through Air Cleaner		
Replacement Filter (1. Replace every 6-12 months) (2. Replace every 2 years)	**12758 (GFI #4001)**	**401 - 13156 (GFI #4051)**	1. **RHP562 HEPA Filter (GFI #4620)** 2. **ARK564 Annual Kit (2) (GFI #4610)**
Installation	Return Air Duct	Return Air Duct	Return Air Duct
Pallet Quantity	10	10	20
Warranty (Years)	10		5
In the Box	Air Cleaner, Filter, Pleat Spacers, Installation Manual		Air Cleaner, Filters, Installation Manual
Typical Application	Inline	Inline	Duct (bypass) or Wall (remote)

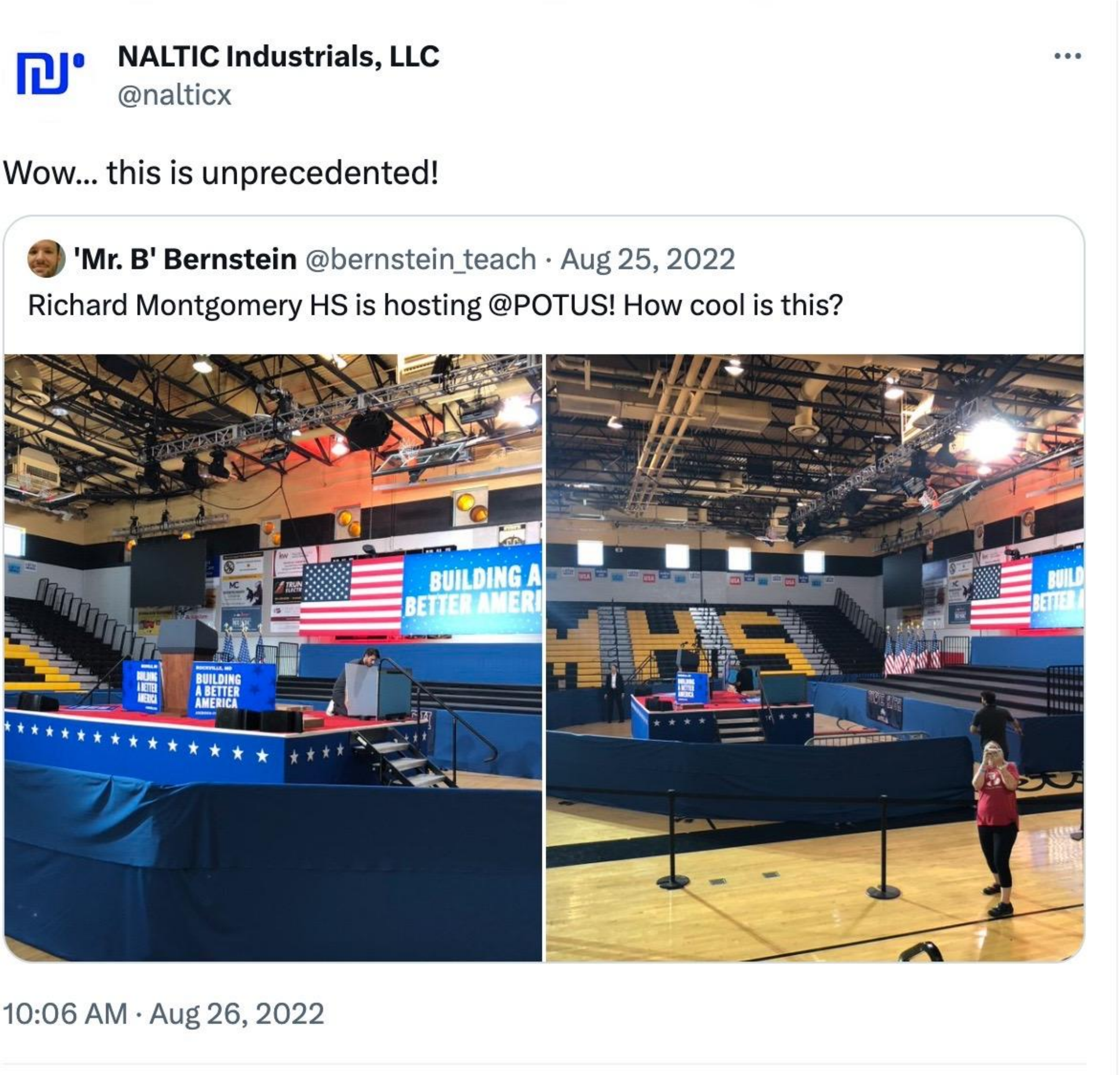
Features

AC Air Cleaners
- Built-In Filter Change Indicator
- Ten-Year Warranty

HEPA
- 2-Speed Motor
- Child Safety Switch
- Easy-Open Door Latch
- Five-Year Warranty

In response to the image of the AC units on Twitter, NALTIC Industrials, LLC (the company that is the first distributor of Aranet4 in the US) described the elaborate setup as “unprecedented” (see below).

And they would know! NALTIC services “Aerospace, Military, Gas/Oil Wellhead, and Manufacturing companies” and NALTIC Industrials (NALTIC) “provides only top-of-the-line industrial hardware, and raw and specialty chemicals, all across the United States and worldwide.” If they’re describing this setup as “unprecedented” (and if you have ever been to a televised indoor event where the building’s windows remained inta is pretty safe to say that this was not an ordinary AC setup.



NALTIC Industrials, LLC
@nalticx

Wow... this is unprecedented!

'Mr. B' Bernstein @bernstein_teach · Aug 25, 2022
Richard Montgomery HS is hosting @POTUS! How cool is this?

10:06 AM · Aug 26, 2022

(Shoutout to the Parents' Coalition of Montgomery County, Maryland for sharing this information with the rest of us. We share your belief that kids deserve clean indoor air.)

Other presidential precautions

Biden and his staff require the people around them to take PCR tests before getting anywhere near him. Here's an article from May 2023 about how the White House Correspondents' dinner attendees are all being asked to test for Covid (because 2022's dinner was a superspreader), and a press briefing from September 2022 where the dinner was a superspreader), and a press briefing from September 2023 where the press secretary confirms that when staffers meet with the President they always test beforehand. Additionally, the Executive Office of the President has renewed the contract they have with CVS to continue providing "Covid Testing Services" through at least September 2024.

(Know of other heads of state who continue to take Covid precautions despite outwardly suggesting otherwise? maskupwithus at gmail dot com.)

CO2 monitoring

Carbon dioxide (CO2) is a gas that naturally occurs in the air. Measuring CO2 levels is a way to assess indoor air quality. We exhale CO2, and if indoor spaces aren't adequately ventilated, the concentrations of indoor CO2 will go up—and higher amounts of the air we breathe in will consist of other people's exhalations. Well-ventilated buildings that bring in plenty of fresh outdoor air (reducing the concentrations of other people's exhaled breath indoors) lessen the amount of exhaled virus in the air, making the space much safer—which is why monitoring CO2 matters.

CO2 sensors (like the Aranet4) are being installed in certain schools, workplaces, and public buildings. Belgian law requires public spaces to display CO2 levels. Some parents (who have hundreds of dollars to drop on these sensors) are even sending their children to school with them to ensure their classrooms are safe.

Nasal photodisinfection

Celebrities are using hospital-grade technology to photodisinfect their nostrils. KISS's manager, Don McGhee, talked about the band's use of nasal photodisinfection in an interview, saying, "Without this, we wouldn't be on the road." The technology, called Steriwave, has been used by hospitals to reduce infections in surgery patients for more than a decade and is now available commercially for a very high cost. Not only ha been scientifically proven to reduce the number of Covid infections in workplace settings, but it also lessens the progression of symptoms.

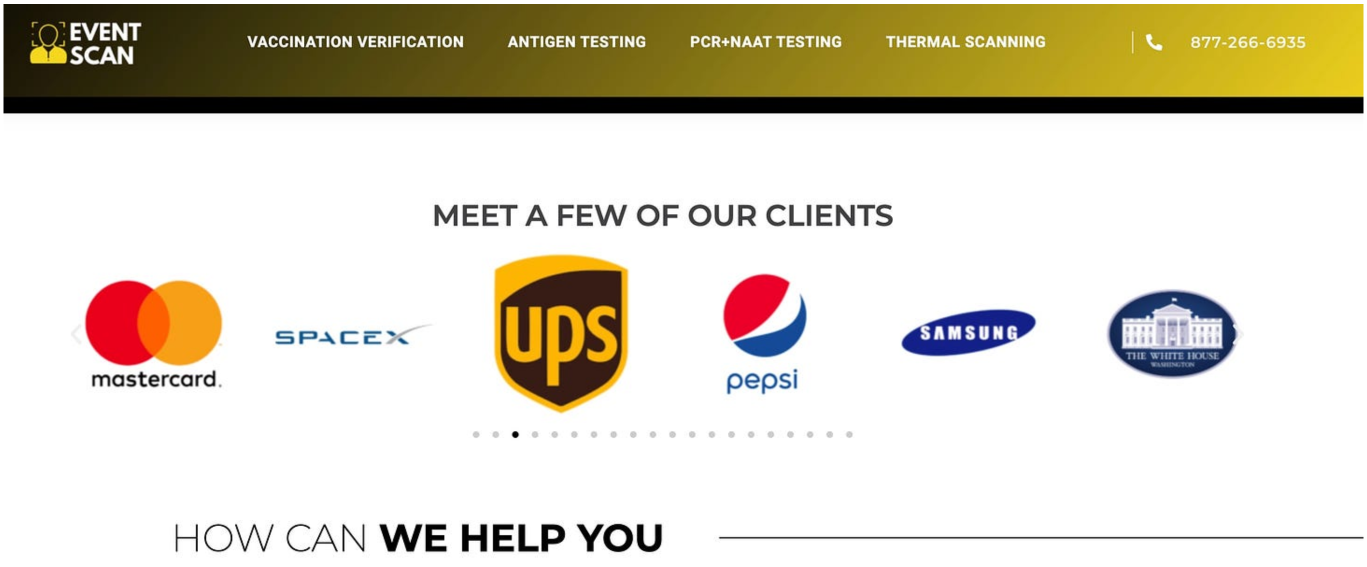
settings, but it also lessens the progression of symptoms.

There's no way to know how many other celebrities and wealthy individuals are using this tool to stay safe, but it's doubtful that KISS is the only touring act taking advantage of this tech.

EventScan and Covid prevention companies

Corporations and the US government are blatantly, openly admitting to using a fancy Covid prevention services company for their parties and meetings. EventScan promises "the best available in COVID-19 prevention services for event hosts, guests, vendors and venues" and they provide testing services for "corporate conferences, privately confidential meetings, federal courthouses, government offices, sporting events, commercial/TV/film shoots."

Their website lists several major corporations and governmental agencies as current clients, including the US Department of Homeland Security, The White House, the US DOJ, SpaceX, Chevron, MasterCard, UPS, and more.


EVENT SCAN
VACCINATION VERIFICATION
ANTIGEN TESTING
PCR+NAAT TESTING
THERMAL SCANNING
877-266-6935
mastercard
SPACEX
ups
pepsi
SAMSUNG
THE WHITE HOUSE
WASHINGTON

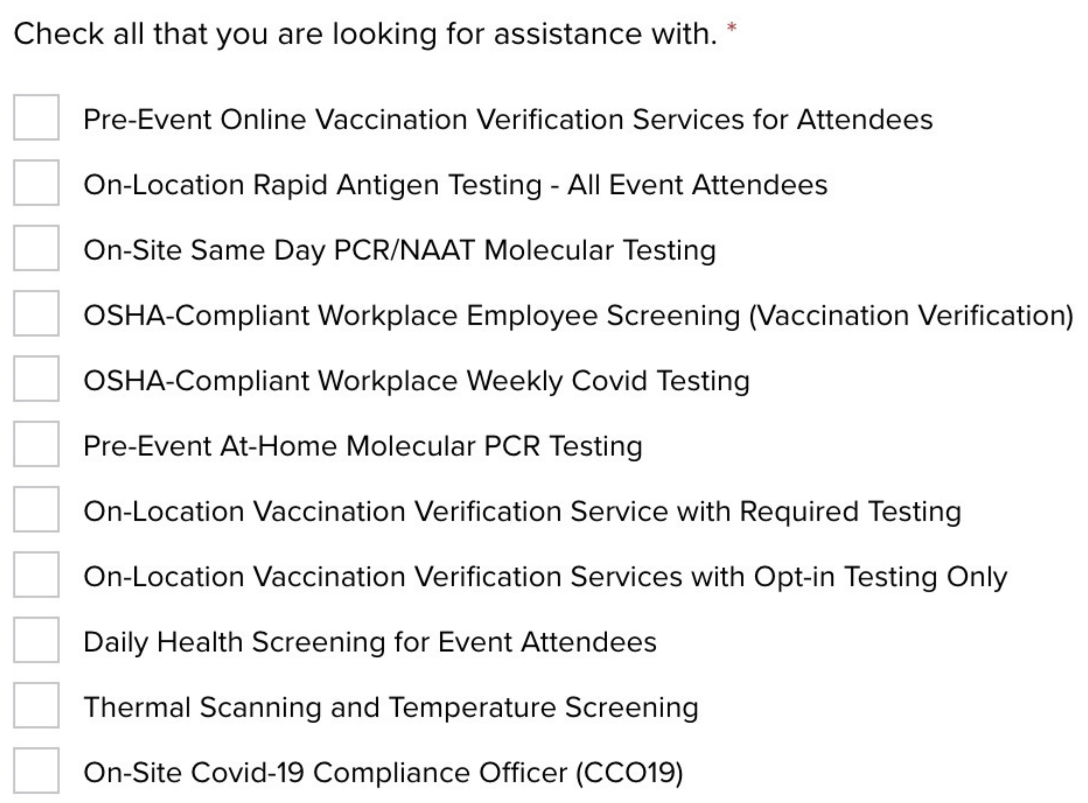
MEET A FEW OF OUR CLIENTS

HOW CAN **WE HELP YOU**

The Covid tests sold at drugstores are rapid antigen tests (RATs). They're diagnosti unreliable, and the chances of getting false negatives are very high. Molecular testing (like PCR testing) is the only way to get accurate results. The end of the public health (like PCR testing) is the only way to get accurate results. The end of the public health emergency has meant the end of most Americans' access to PCR testing (since a single PCR test can cost upwards of $150 without insurance). Knowing whether or not you and your guests have Covid has become a luxury that only the rich can afford to pay for.

And they are paying for it. The rich CEOs of these major companies and rich government officials are getting everyone PCR (or LAMP) tested before their big corporate parties, screening all their guests beforehand, and taking Covid very seriously—while telling their low-level employees to return to the office.

EventScan Services

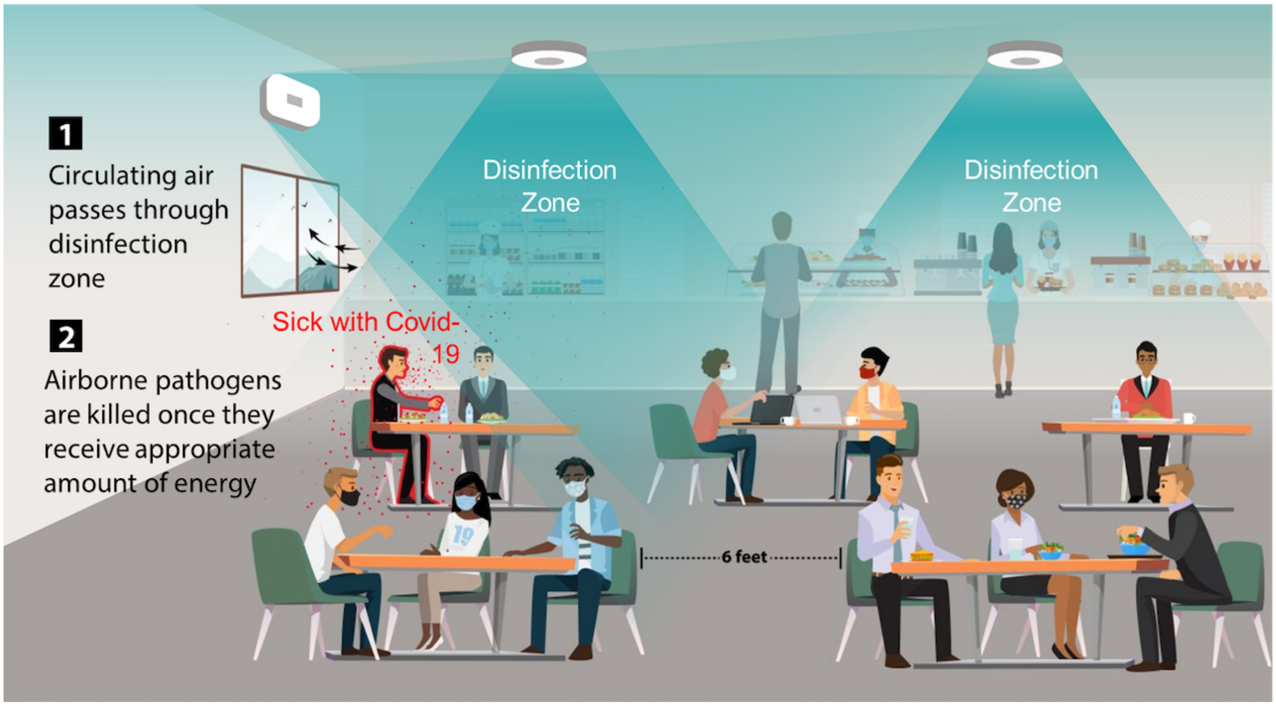


Check all that you are looking for assistance with. *

☐ Pre-Event Online Vaccination Verification Services for Attendees
☐ On-Location Rapid Antigen Testing - All Event Attendees
☐ On-Site Same Day PCR/NAAT Molecular Testing
☐ OSHA-Compliant Workplace Employee Screening (Vaccination Verification)
☐ OSHA-Compliant Workplace Weekly Covid Testing
☐ Pre-Event At-Home Molecular PCR Testing
☐ On-Location Vaccination Verification Service with Required Testing
☐ On-Location Vaccination Verification Services with Opt-in Testing Only
☐ Daily Health Screening for Event Attendees
☐ Thermal Scanning and Temperature Screening
☐ On-Site Covid-19 Compliance Officer (CCO19)

Far UV-C

The schools, workplaces, and homes of the rich are being outfitted with special UV lights that kill viruses in the air—including SARS-CoV-2. Far UV can continuously and autonomously eliminate over 90% of pathogens in the air (and on the exposed surfaces) of an enclosed room. These high-tech lights cost thousands of dollars. Portable versions can be yours for hundreds of dollars. Fortunately for government employees, many government buildings and military facilities have already been outfitted with these lights. Unsurprisingly, it's the "preferred disinfection solution for many Department of Defense organizations."


1
Circulating air passes through disinfection zone
2
Airborne pathogens are killed once they receive appropriate amount of energy
Sick with Covid-19
Disinfection Zone
Disinfection Zone
6 feet

- Source: Far UV Technologies

LAMP Testing

Loop-Mediated Isothermal Amplification (LAMP) testing may be the "better sibling of PCR testing" and is being used by the rich to rapidly diagnose Covid-19. As of 2021, these fast, accurate tests were primarily being used by "tourism and sports compa and corporations." The only Lucira test that uses this technology requires a prescription

prescription.

Fancy private schools, like this one (whose tuition fees are $17,664—$18,900 annually) are requiring all visitors to submit samples for LAMP testing—in addition to daily testing of students, teachers, and families, requiring high-quality masks, cleaning the air, serving outdoor lunches, and a lot more.

Covid-sniffing dogs

In some places, trained dogs are being used to detect Covid infections, with a stunningly high degree of accuracy (~90%). These dogs have been used to detect Covid infections in select schools,airports, and more. The Miami Heat has used Covid-sniffing dogs to stay safe. Multiple people have reached out to us and shared stories of these dogs being used on film sets and in their own workplace settings.

Avoiding the public

Billionaires are homeschooling their kids. They have private airport terminals (where their drivers wear masks) and private aviation companies with masked luggage handlers. They're not working in the office—they're 'working' remotely from their superyachts.

All of the above: #DavosSafe

Billionaires gathered at Davos took maximum precautions at the World Economic Forum in January 2023. High-filtration masks were made available, and many attendees were photographed wearing these respirators. Participants were required to have a negative PCR test result in order for their badges to be activated. HEPA air cleaners were set up in every room and UV lights were installed. Venues were cleaned multiple times daily, and "additional state-of-the-art ventilation systems were inst in areas with restricted air circulation."

U.S. Military

The military knows that Covid is not over. The U.S. Department of Defense is investing in state-of-the-art wearable tech for soldiers that could rapidly predict disease, because they know Covid is extremely serious. They literally have wristwatch devices that can predict if the wearer is getting sick. Do regular people (us) have access to this kind of safety? What other kinds of tech do they have available just for them?

> The algorithm leverages biometric data from commercial grade off-the-shelf wearables. The RATE algorithm enabled early detection of infectious diseases up to 48 hours before symptoms appeared. The algorithm, which, in some cases, predicted infections up to six days prior to onset, and included asymptomatic cases, was featured in a 2022 study published by the journal "Nature's Scientific Reports," highlighting the efficacy of the algorithm-powered wearables to aid military readiness, Schneider said.

–DOD Investing in Wearable Technology That Could Rapidly Predict Disease

How many other rich people are doing this stuff and not saying so openly? What other kinds of treatments do celebrities have access to that regular people do not? Why are you risking your life to go to these shows, when these artists are protecting themselves but not protecting their fans?

(Source: Normalcy Fugitive)

Not me

“Covid isn’t dangerous anymore.” / “I’ve already had Covid, so I can’t get it again.” / “I have immunity to Covid now and I’m not

worried about getting reinfected.” / “Reinfections after vaccination are rare.” / “Reinfections do happen, but they’re mild.” / “I’m healthy and so I’m not worried!”

📝This is what many other objections are built around, so no matter what other talking points you end up using, you should try to find a way to share this information, too.

You can get Covid over and over. The idea that you become immune to Covid after getting infected or vaccinated is based on the concept of immune memory—a concept that took me a while to understand! Basically, every time a virus enters your body, your immune system works to stop it. Your immune system is trained to recognize that specific virus in the future by taking a snapshot of it. This is why vaccines help: they show your immune system a harmless part of the disease so your body can remember it when it sees the real thing. You can think of your immune system like a photo album (*not* like a muscle that weakens if you don’t use it).

But the problem is that Covid keeps evolving and changing. So the variants right now don’t look like the version your body has a snapshot of. The more people who are getting infected right now, the more times the virus is changing—meaning it’s more likely your immune system won’t recognize the new strain. The version of Covid that we saw in 2020 isn’t around anymore. The virus looks entirely different now, and our bodies don’t recognize it: meaning we’re all still very vulnerable.

There’s also lots of evidence that Covid weakens our immune systems and changes how they work. What does this mean? Your body’s ability to fight off disease has been weakened, not strengthened, the more times you’ve had Covid. Many studies have shown that if you've had Covid, you're at an increased risk of contracting fungal, bacterial, and viral infections. Here’s an article that talks about this and explains it really well, if you want to read it!

It wasn’t until 2022 that we learned that Covid can persist in tonsils, the brain, the lymph nodes, the heart; generally anywhere in the body. We also recently found o that even so-called “mild” infections can cause 2% loss of grey matter in the brain.

Here's another good article that helped me understand this, if you want to learn more and decide for yourself. Each year, we learn more about this disease. There's so much we still don't know.

We know that vaccines don't prevent you from catching Covid or transmitting it to other people, so you could still get other people really sick by not wearing a mask. We also know that vaccines don't stop people from ending up with Long Covid, which is what we're calling it when people get Covid and then never recover. Anyone can get Long Covid, even people who were really healthy before—even kids.

Have you heard about all of the professional athletes and celebrities who have ended up with Long Covid? Even the "healthiest" people in the world are being disabled by Covid. And it's ending people's careers. I can't afford to lose my job. I'm wearing a mask because I don't want to end up with another chronic illness, or lose my ability to care for my family and do the things I love. By wearing a mask, I'm protecting my future.

More complex version for science-minded folks

(Once again, taken from this incredible article):

> You can get Covid over and over. The idea that you become immune to Covid after getting infected or vaccinated is based on the concept of immune memory. Every time a virus enters your body (either through infection or vaccination), your immune system mounts a defense to stop it: first a broad "kill anything that moves" phase we call innate immunity, then a phase of adaptive immunity, which is targeted to kill the specific thing that triggered the immune response. Pieces of the invader are used to create, recruit, and activate a variety of immune components—including antibodies, T cells, and B cells—that are trained to recognize that specific pathogen. Some cells of the immune system, called memory cells, are kept around from that second stage as a sort of permanent record. If the exact same pathogen shows up again, the immune system already knows what to look for. This is the key behind vaccination: expose your immune system to a harmless piece of the virus, and remember it when it encounters the real thing.

> Except this isn't even close to the whole story. For one thing, the snapshot stored in your immune memory is just a physical piece of the pathogen, and viruses evolve very quickly. As the virus changes, the real thing starts to resemble the record being kept by your immune system less and less, and it becomes easier and easier for new variants to evade adaptive immunity. The more people that get infected, the more times the virus randomly mutates—and the more likely it is that a particular combination of those mutations makes a virus that is unrecognizable to your immune system. For a while, the WHO used to categorize these mutants as "variants of concern," giving them each a new name. When the virus mutated enough to evade the immunity to the wild-type virus, they named it alpha. The lineage that was able to evade alpha was called beta. Delta was particularly immune evasive and its mutations brought high levels of lethality. Omicron was so different from all existing strains that it was practically able to infect everyone, no matter when they got infected and/or vaccinated. And then… they stopped giving the variants names. "Omicron" is still used to describe every descendant of that original variant, despite the dozens of highly-infectious, highly dangerous variants circulating today, none of which look enough like omicron itself for your immune system to efficiently recognize them.

> Covid is dangerous and damaging because it's syncytial. Syncytial means that it can enter a cell, hijack its internals, and use that cell to create nanotubes that reach out and grab other cells melting into them. Then Covid can repeat this process over and over again until it makes a giant super structure out of your cells.

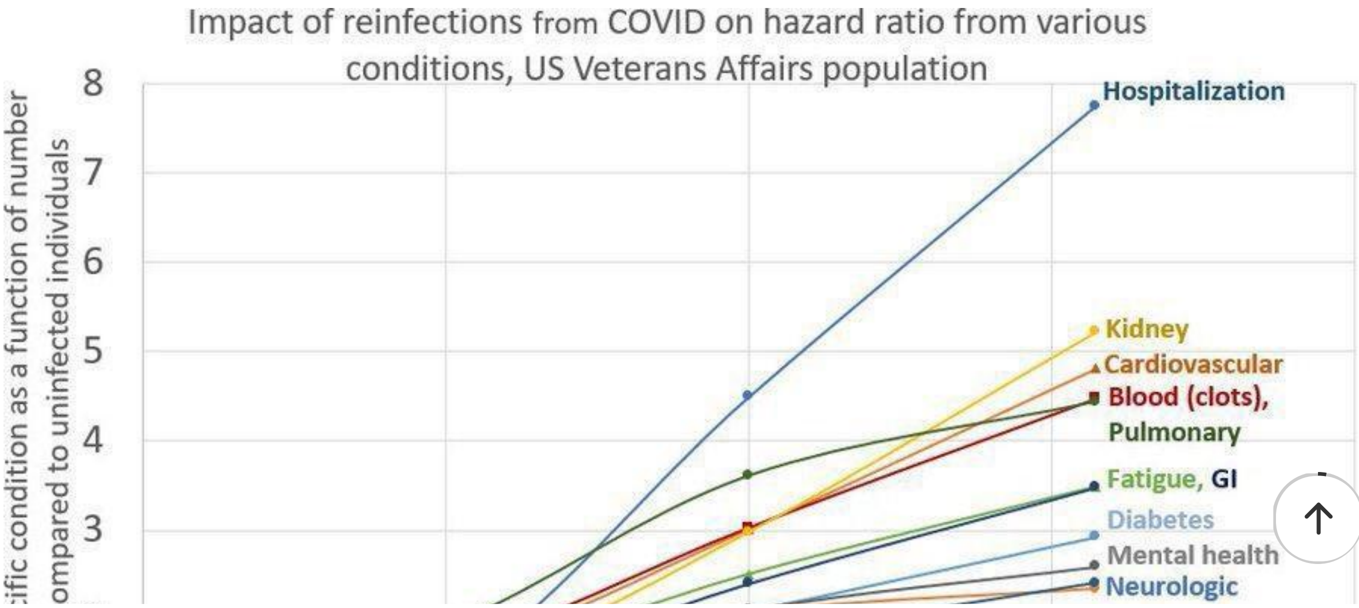
—"Let Them Eat Plague"

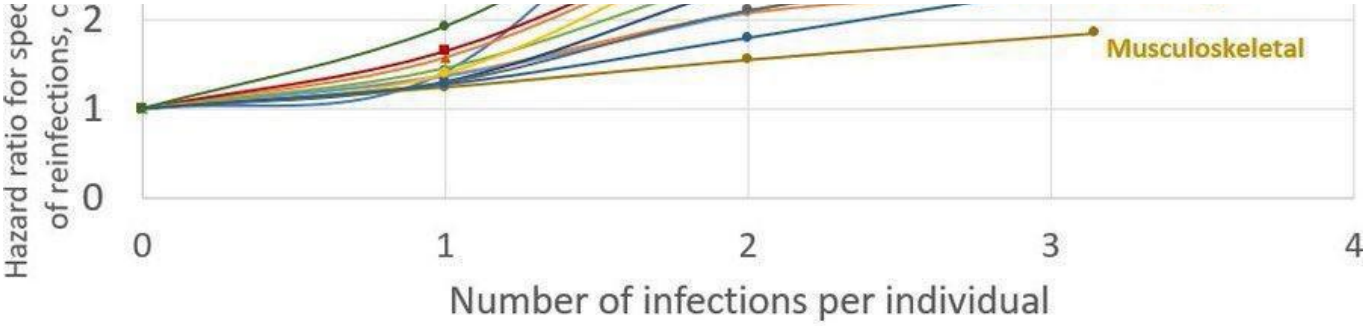
"I don't need to mask because I'm vaccinated and boosted!" / "I don't need to mask because I have hybrid immunity."

It's good that you got vaccinated! For a while, the vaccines were really effective at preventing severe acute (short-term) Covid outcomes and preventing some hospitalizations—not because they prevented people from getting Covid in the first place or created lasting immunity, but because they prompted your body to create antibodies to the virus, which can stay in your blood for months. So if you got infected while these antibodies were present, it helped your immune system compensate. Your immune response was less likely to go haywire, cause massive tissue damage, or lead to severe clinical outcomes. But here's the thing: Covid has kept evolving and changing. The new strains don't look like the old ones, and our bodies won't recognize them very well. By the time boosters became available, the original vaccines weren't very effective anymore: they were made to target the original version of the virus, which isn't the same variant that's being spread now.

We also know more now about the vaccines than we did before. We know that vaccines don't prevent you from getting sick with Covid or transmitting it to other people, so you could still get other people really sick by not wearing a mask. We also know that vaccines don't stop people from ending up with Long Covid. A huge study showed that the risk of Long Covid falls only slightly after vaccination. (This article explains it well).

Plus, Covid is still really, really dangerous. It can damage your entire body, and it's still killing people—we go into more detail about this here.





Source: ***Acute and postacute sequelae associated with SARS-CoV-2 reinfection, Al-Aly et al., 2022***

This graph shows the devastating impact of reinfections. We know that three infections compared to one can result in an increase in health problems. Your third infection carries a 8x greater risk of being hospitalized, a 5x risk of cardiovascular disease, and a 4x risk of blood clots.

“We’re using HEPA filters, so we don’t need to wear masks at the party.”

Nationwide Covid wastewater in the U.S. is on a steep incline over the last week, meaning we are in a big surge right now. There's no safety at this event unless people mask indoors (KN95 or N95); people will do what they see fit, but HEPA filters don't prevent transmission and aren't a substitute for layered mitigations. Meals should take place on the patio, not indoors. Rapid test effectiveness has sharply declined against new variants, but if everyone tested beforehand, it would be better than not testing at all. This is not just an issue for already-sick people; in fact, rich healthy people take zero chances with it. For comparison, the White House uses this company called EventScan for all their maskless events (and everyone who meets with the president is PCR tested beforehand).

If you look at the precautions governments and companies take, you'll see that everyone is PCR tested (not rapid antigen tested) before gathering and several layers of mitigations are in place. Because that is the level of precaution that is necessary to ensure safety, sans masks. Other major companies use these services as well, because they're not taking their chances. Unless you have access to the same tools they're using, unmasked events aren't safe. I wish this weren't the case and I wish public health hadn't completely failed all of us. I highly encourage you to check out the

EventScan services list in particular. Y'all deserve this information so you can make an informed choice.

"I don't need to wear a mask when I'm outdoors."

It's good that you're moving plans outdoors and masking indoors! I appreciate the steps you're taking to keep your community safe. You're right that spending time outdoors is safer spending time indoors right now. But when in crowds, it's best to mask up. Covid is a lot more contagious than it used to be!

Older strains of the virus were a lot harder to catch outdoors. But remember, Covid travels in the air like smoke and can linger in the air. So I still wear a mask when I'm outdoors around groups of other people. Here's a podcast that talks about outdoor transmission where I learned about this. What other questions do you have? Masks do work, though. What you're describing is called one-way masking, and you're right that it is better than no masks. But the more people that wear masks, the safer we all are. It's being tracked less closely but transmission is still high right now, and the more people who wear masks, the less germs and viruses are present in shared indoor air.

Here's an article that explains this really well! Can I share it with you?

Share this: "Why One-Way Masking Isn't a Very Good Public Health Solution" (*Slate*)

"Why should I care? I'm not old/disabled/unvaccinated."

Response copied from another fantastic resource (the Covid info database) and used here with permission from the author.

> If you genuinely only care about yourself, you should know that you are in dang too—both from the disease itself and the consequences of it disabling and killi millions of people.

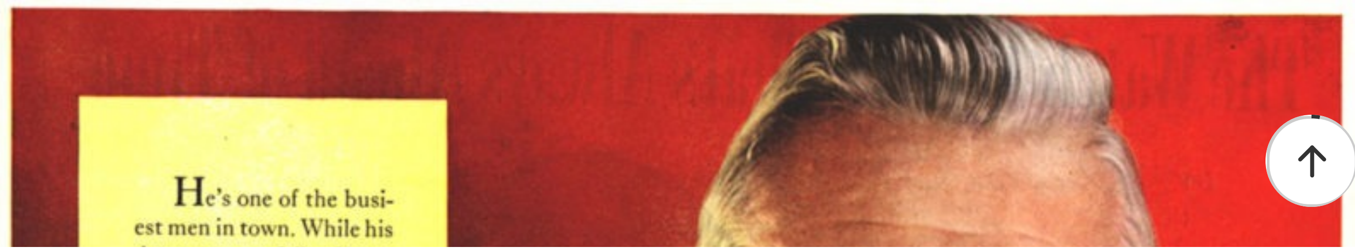
> You should care about other people. But if only care about yourself and people like you, then advocate for preventing Covid for selfish reasons: Workers getting sick causes major supply chain disruption, which costs everyone more money; more people getting sick and hospitalized means fewer hospital beds open if you have a bad sports injury or get into a car accident; sick pilots, flight attendants, and air traffic controllers mean canceled flights; it goes on. Long Covid is disabling so many people that rampant infections have the chance to permanently upend travel, manufacturing, food service, and health care.

“My doctor said I don’t have to wear a mask.”

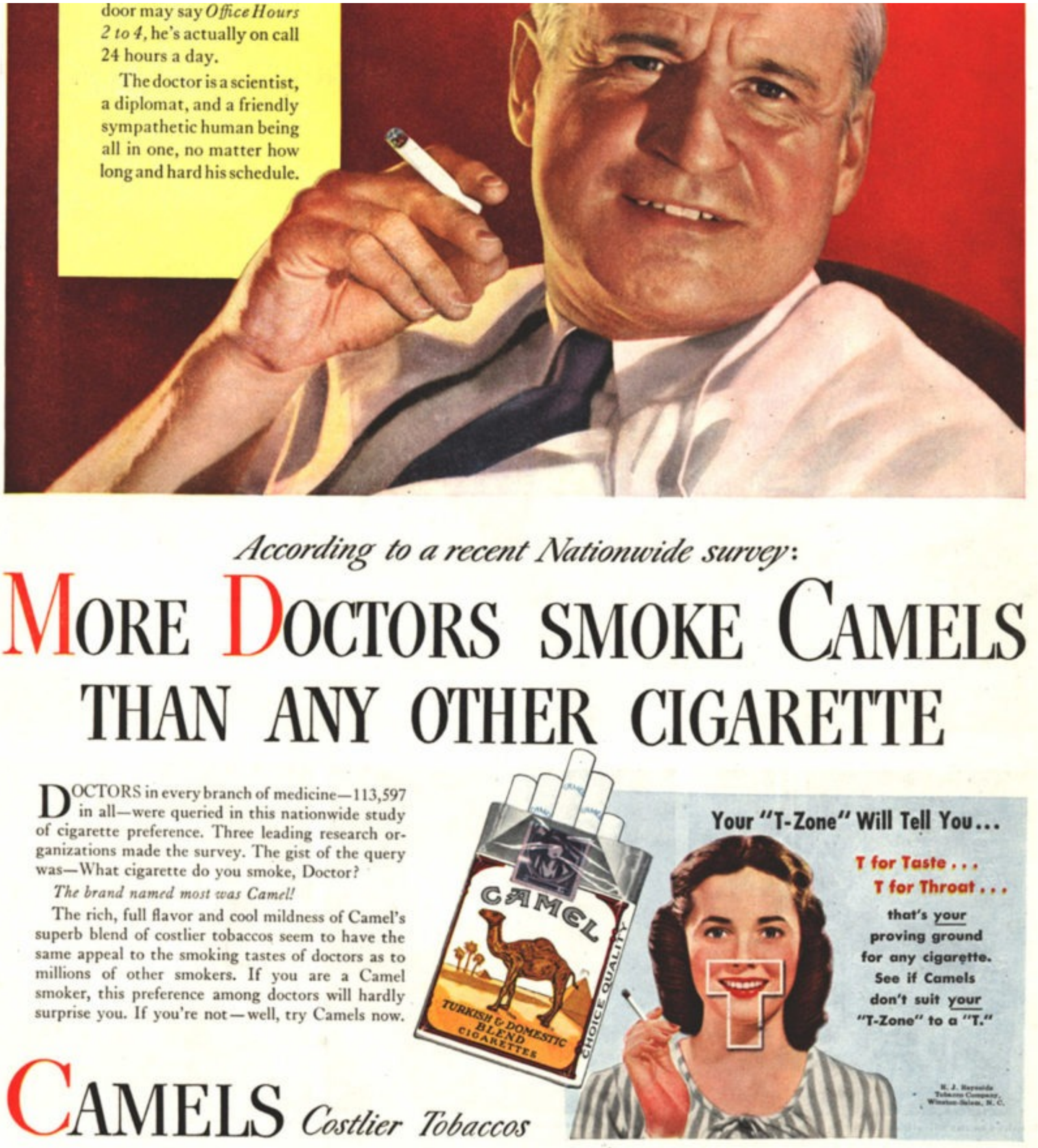
It’s good that you’re trying to care for your health and take care of yourself. But the truth is, doctors can be wrong—they’re people just like us. Remember how many doctors used to claim cigarette smoking was perfectly safe? (see below) They were wrong about that, and your doctor is really, really wrong about the pandemic being over. There are many doctors who are continuing to wear masks around their patients, and I can share some resources from doctors who have taken the time to explain why it’s still so important to wear a mask in 2023.

Option: send them this video, which explains why so many doctors are misinformed about Long Covid.

Option: show them the ad below, which was a real 1946 magazine advertisement for Camel cigarettes by the R.J. Reynolds Tobacco Company.



He’s one of the busiest men in town. While his



door may say *Office Hours 2 to 4*, he's actually on call 24 hours a day.

The doctor is a scientist, a diplomat, and a friendly sympathetic human being all in one, no matter how long and hard his schedule.

According to a recent Nationwide survey:

MORE DOCTORS SMOKE CAMELS THAN ANY OTHER CIGARETTE

DOCTORS in every branch of medicine—113,597 in all—were queried in this nationwide study of cigarette preference. Three leading research organizations made the survey. The gist of the query was—What cigarette do you smoke, Doctor?

The brand named most was Camel!

The rich, full flavor and cool mildness of Camel's superb blend of costlier tobaccos seem to have the same appeal to the smoking tastes of doctors as to millions of other smokers. If you are a Camel smoker, this preference among doctors will hardly surprise you. If you're not—well, try Camels now.

Your "T-Zone" Will Tell You...

T for Taste . . .
T for Throat . . .
that's your proving ground for any cigarette. See if Camels don't suit your "T-Zone" to a "T."

CAMELS *Costlier Tobaccos*

R. J. Reynolds Tobacco Company, Winston-Salem, N. C.

In 1946, in response to concerns about smoking and lung cancer raised by prominent chest surgeons Richard Overholt, Alton Ochsner, Dwight Harken, Michael DeBakey, and other physicians, the R.J. Reynolds Tobacco Company introduced a print and radio advertising campaign for its Camel cigarette brand, with the slog 'More Doctors Smoke Camels.' Although the company claimed the campaign v based on a survey of 113,597 physicians, the methodology was not described, and it

> is not known if free samples of Camels had been sent to doctors just prior to the survey.

- The “More Doctors Smoke Camels” Campaign, via The University of Alabama

“The only people harmed by Covid are old and immunocompromised people.” / “Healthy children don’t get Long Covid.”

A lot of people have been promoting this lie, and it’s really the CDC’s fault that so many people still believe this. The truth is, anyone can develop Long Covid, regardless of vaccination status or age. Covid can damage every organ in the body, including the brain, heart, and GI system—even in young, previously healthy people and kids.

Also. *Even if* the only people being harmed by Covid were the elderly and the immunocompromised (not true), these people are part of our communities and their lives *matter*! I’m disabled and high-risk. I’m not disposable. Think about what you’re saying right now.

Depending on the values/politics of the person you are in conversation with, you could bring up ableism/eugenics ideology here:

> able·ism /ˈābəˌlizəm/ noun: A system of assigning value to people's bodies and minds based on societally constructed ideas of normalcy, productivity, desirability, intelligence, excellence, and fitness. These constructed ideas are deeply rooted in eugenics, anti-Blackness, misogyny, colonialism, imperialism, and capitalism. This systemic oppression that leads to people and society determining people's va based on their culture, age, language, appearance, religion, birth or living place,

> "health/wellness", and/or their ability to satisfactorily re/produce, "excel" and "behave." You do not have to be disabled to experience ableism.

-working definition by @TalilaLewis

If they have anti fascist political leanings, consider sharing this essay:

"Hate fascism? Then don't be a health supremacist" by Maarten Steenhagen

Children and parenting

Parents face a lot of judgment from society for how they raise their kids, and could be understandably defensive or be feeling guilty. Make sure you're asking questions and showing genuine interest in their concerns. Show compassion and understanding for what they've been dealing with during the pandemic. They are carrying a huge burden and have been left with huge responsibilities that shouldn't be solely on their shoulders. And they have to do it while juggling school policies, childcare arrangements, and their own jobs. Remember that they are doing their best.

"What about immunity debt?" / "Kids need to be exposed to Covid."

I'm sorry you've been lied to about immunity debt. The idea that your immune system trains itself up like a muscle, by being exposed to lots of different infections is not true. That's not how it works. Here's a great video of a doctor who explains this in under a minute! And here's an article that helped me understand why "immunity debt" doesn't actually make sense.

Also: if exposing children to infections at young ages was better, children in countries where this happens would be doing great, but this isn't the case.

Mortality in children is higher and at younger ages in countries where childhood

Mortality in children is higher and at younger ages in countries where childhood exposure to infections is high (i.e., more children die, and more children die younger in populations with high rates of infectious diseases). Children are healthier and have lower mortality rates in populations with higher vaccination rates and less exposure to infectious diseases. Can I share some resources that helped me learn more about this?

- Share this: “Immunity debt isn’t real and viruses are not our friends” by Amanda Hu

“But kids need to be exposed to germs when they’re young” / "Our doctor said it builds immunity”

(see above answer as well)

Kids don’t need to get sick to be healthy! And we’re all exposed to germs every day, but we still wash our hands and treat or filter our water because we know those things are good for us. Think about it: we know that viruses like the cold and the flu evolve over time. All of the colds you caught when you were a kid didn’t stop you from catching colds as an adult, right?

We don't actually know what early infection to Covid does long-term, because Covid has only been around for a few years. What happens ten years down the road? We can’t say. But there are already signs that exposure in utero can negatively affect traits like lung development, birth weight, neurodevelopmental impairment, brain injury, and a Covid infection in early to mid pregnancy is associated with an increased risk of stillbirth, with even more possible negative consequences later. Covid infections during pregnancy also greatly raise the risks of premature birth, maternal mortality, pre-eclampsia, hypertension, and developing Long Covid. Here is a collection of studies outlining the many serious dangers of catching Covid while pregnant.

And even if we only look at the last couple of years, Covid is a leading cause of pediatric deaths. This study based on data from mid-2021 to mid-2022 found that

Covid was the leading cause of pediatric (0-19) infectious disease deaths in the US and concluded that it was a "significant disease burden for children and young people, so pharmaceutical and nonpharmaceutical interventions continue to be important to limit transmission of the virus and to mitigate severe disease".

For suggestions on talking with children and youth about Covid, see this section.

How Covid works

"Stop the spread by washing hands, standing 6 feet apart, and sanitizing surfaces." / "Covid is not airborne" / Social distancing means I can take off my mask." / "I keep my distance from people who are sick!"

There's been a lot of confusing guidance about how Covid spreads, so I understand why you think that! But the truth is, Covid is airborne and moves through the air like cigarette smoke. Airborne transmission is different from droplets, which are large particles containing the virus, expelled when you speak, cough, sneeze, etc.

Droplets are heavy enough that they will eventually drop to the ground or nearby surfaces, meaning droplets are easy to contain: any physical barrier—like a cloth mask or plexiglass— will block these droplets before they can reach another person. At the start of the pandemic, this is how we thought Covid worked; we thought it spread through droplets. That's why "social distancing" was recommended. But staying six feet apart only works for droplet transmission, because it assumes that virus-containing droplets will fall to the ground before reaching someone 6 feet away. We know better now, and so we have to change our understanding of how to protect ourselves. It's in the air.

Covid is not confined to droplets. Aerosols are composed of much smaller particles that bounce around between air particles, and can stay suspended and infectious the air. Picture someone smoking and think about how the smoke travels. Can you still smell the smoke behind a plexiglass shield? How about if you're six feet apart? In a crowded indoor room, how many people would breathe in the smoke of one smoker?

Measures designed to protect against droplets aren't exactly pointless against Covid, since it also spreads via droplets. But just because you're keeping your distance does not mean you're keeping your germs to yourself (and the same is true for the people in a room with you)! And just like smoke can linger in a room after a smoker leaves, so can Covid. That's why I always wear a high-quality mask when I'm in public spaces; I'm protecting myself and my family from getting this really dangerous illness.

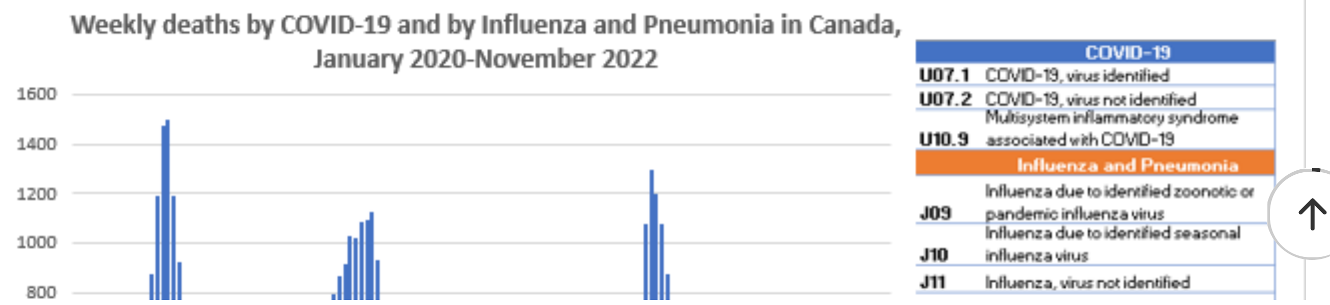
Further reading

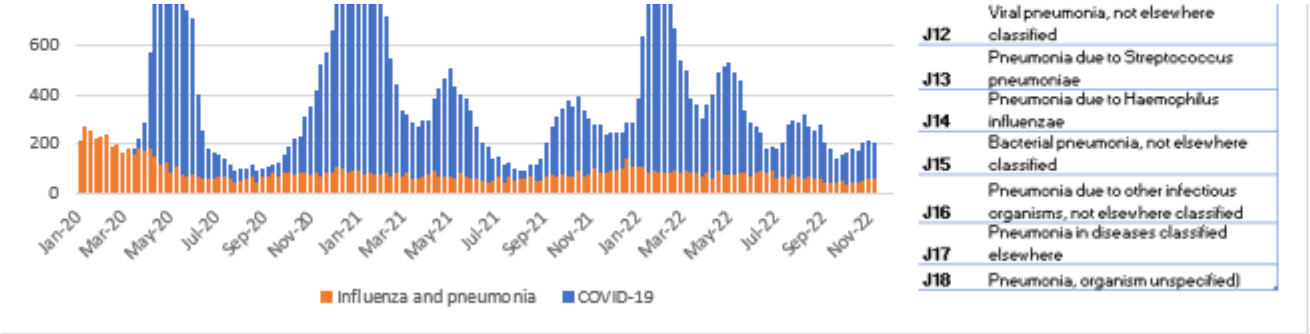
We have known for years that Covid can spread through aerosol as papers published in the New England Journal of Medicine, Emerging Infectious Diseases, and Risk Analysis demonstrate going back to 2020.

"Covid is just like the flu."

You know how flu season happens at the same time every year? People are catching Covid multiple times a year, all year long. And Covid is way more dangerous than the fludid you know that Covid is the third-leading cause of death in America right now (and globally)? It's true. Even with vaccines, Covid is more transmissible, more deadly, and more damaging than the flu. Also, I don't know about you, but I've only had the flu a couple of times—it's not something I catch every single year.

Covid is 5-10 times deadlier than the flu. It's not the flu.





J12	Viral pneumonia, not elsewhere classified
J13	Pneumonia due to Streptococcus pneumoniae
J14	Pneumonia due to Haemophilus influenzae
J15	Bacterial pneumonia, not elsewhere classified
J16	Pneumonia due to other infectious organisms, not elsewhere classified
J17	Pneumonia in diseases classified elsewhere
J18	Pneumonia, organism unspecified)

(Source)

Next steps

I don't know about you, but I don't like getting sick with the flu, either! Protecting ourselves through actions like masking, cleaning indoor air, and staying home when sick are great ways to reduce our chances of catching the flu, which can also cause immune system damage or serious health outcomes. Reducing the spread of Covid also reduces the spread of other damaging diseases, and it's good for all of us!

“Covid is endemic now.”

There's a lot of confusion about what Covid becoming endemic means. Plus we still take precautions for endemic diseases all the time (e.g. condoms). Can I share a short essay with you from a scientist explaining why a disease being endemic doesn't make it less serious? This article helped me understand what endemic means.

When you say Covid is endemic, what exactly do you mean? Endemic means that a disease is found within a specific geographical location and has a constant presence within that area at steady predictable levels. An epidemic means widespread outbreak of a disease in a particular area or community. A pandemic is an outbreak of disease that occurs over a large geographical area, usually globally.

All of these terms seem very similar but have distinct differences. When people u the term endemic to describe Covid, it is an inaccurate description of what is actually happening. I think many people really just mean that Covid is here to stay. But Covid is not restricted to any geographical location, so it's not endemic. Covid is found globally around the world at high levels. Covid is a rapidly mutating virus and governments globally have restricted testing and data to the public. Telling the public Covid is endemic is a political decision, not a scientific truth. It is purposely shaping the narrative that Covid is inevitable and giving governments a pass on fixing healthcare, updating existing infrastructure, and improving labor laws and regulations. When people say it's endemic, they are often saying this to argue that there's nothing we can or should be doing to prevent transmission but we are not helpless bystanders in our current situation. We have the power to stop and slow the spread of transmission, which starts with individual actions like wearing a well-fitting mask (respirator).

"I recovered from Covid and now I'm out of the woods." / "I had a mild case of Covid, so I'm not worried anymore."

I'm glad you are feeling OK and that you didn't end up in the hospital. And I'm not trying to scare you, but the truth is, none of us can know yet if we're really out of the woods here just because we feel OK.

What's the long-term consequence of Covid infections? The truth is, we still have no idea. Covid is a coronavirus, and we know this kind of virus can stay in your body long after your infection.

Chickenpox is the same exact virus as shingles; the virus lives in your body and can get reactivated years down the road, making you sick again.

We have proof that Covid stays in the body and lingers there, even in people who had seemingly mild infections. And we know that while it's still hanging out, it raises your risk of heart attacks, strokes, neurological symptoms, and death—and it only gets worse with every reinfection.

So even if you've already had Covid, and even if we're all going to catch it at some point, it's really worth trying to catch it as few times as possible, at least until we k more about the disease and until treatments or better vaccines are available. Do you still have masks you can wear? Can I help you find some?

A more complex explanation (again, from "Let Them Eat Plague"):

> We've known for years that other coronaviruses, like SARS, can persist in your body long after initial infection. This is likely a byproduct of their evolutionary history; they evolved to spread through bat populations and survive bats' unique immune systems. Bats are very long-lived for their size, potentially living for decades, even with multiple different infections quietly simmering inside them. However, in humans, these viruses' tactics for suppressing a well-regulated bat immune system present a form of overwhelming force, which wreaks havoc on our bodies.

> After the chaotic and potentially-lethal initial stage of acute infection, the virus is able to settle in for the long haul—evidence has been found in the gut, in human waste, and among "cured" patients. This can happen whether the acute phase was disastrous and hospital-worthy, or quiet enough for you to experience no symptoms at all. By this point, the virus will have suppressed your body's immune memory, infiltrated throughout various organ systems—including your cardiovascular, nervous, and renal systems—and begun pumping out a steady supply of new virus.

> Of course, this persistent infection causes damage to the various organs where the virus has made its home, especially since it can trigger further inflammation. Your immune system is constantly trying to smoke it out, damaging more organ tissue as it does so. Your risk of heart attacks, strokes, neurological symptoms, and death in general are much higher during this persistent phase—and it only gets worse with every reinfection. It still remains unclear how long this persistent phase can last—certainly as many months as have been studied so far.

> Evidence has been mounting for years that Covid is actually a type of autoimmune disorder, with several components of your immune system turning against your own cells. Not only are pro-inflammatory molecules heightened in both the acute infection and in so-called long Covid, high levels of antibodies against normal cellular pieces have been found in over half of patients hospitalized with Covid. The implications of Covid triggering autoimmunity are broad and can get fairly technical, but needless to say, the population being infected over and over with such a debilitating virus is catastrophic.

–“Let Them Eat Plague”

“Once enough people have been exposed, herd immunity will end the pandemic.”

Herd immunity is no longer possible and it was probably never possible.

From what I've read, I know that herd immunity only happens when a large enough portion of a population has acquired immunity to a disease in order to limit its spread and therefore protect a small portion of the population who do not have immunity.

This term is also used to refer to the vaccination strategy of eliminating/restricting transmission of a disease by vaccinating the population to a specific threshold and maintaining that threshold in order to protect the whole population including those who can't be vaccinated (people with immature or malfunctioning immune systems like babies and some people with immune conditions or allergies).

Next steps

Different diseases have different effects in our immune system, with some conferring lifelong immunity and others barely any, with frequent reinfections possible. Simila different vaccines have different effects and dosing schemes based on what gives best immunity. Some last a short period of time for viruses that are constantly mutating best immunity. Some last a short period of time for viruses that are constantly mutating—sometimes not providing immunity at all, but at best, providing a more robust immune response to the virus (the annual combination flu shot, Covid shots). Some last longer (tetanus shot for example is recommended after potential exposure if you haven't had one in 10 years), and some can even provide lifelong immunity in one dose (17D Yellow fever vaccine).

Whether immunity via vaccination or infection, the threshold needed differs based on the transmissibility of the disease. Diseases with high infectiousness like measles means a higher portion of the population needs to be immune to confer protection to the non-immune population. Covid-19 is both highly transmissible/highly infectious *and* frequently mutating.

Here's an article that explains five reasons why Covid herd immunity is probably impossible, back from 2021 (there's even more reasons it's impossible now).

"Viruses naturally evolve to become less deadly / Covid is milder now."

I've heard a lot of people saying this, so I understand why you'd think it's true. But the idea that viruses naturally evolve to be less deadly is an idea from the 1800s ("the law of declining virulence") and we've known for a long time it isn't true!

The latest research shows that Omicron is just as severe as previous variants. Getting Covid could actually weaken your immune system. I just read an article that helped me understand this that I can share with you.

Taking other precautions

"We have the tools!"

We do! Implementing indoor air quality standards and encouraging masking are things that can be done right now that would make all of our lives safer. But they're either being ignored by the government or even discouraged in favor of pharmaceutical tools. Pharmaceutical tools (like the vaccines and Paxlovid) that simply aren't as effective anymore. We are starting to lose what tools we have by allowing the virus to spread unchecked and become resistant.

Paxlovid must be started within the first few days of infection to be effective, and not everyone can take Paxlovid because it has so many interactions with a lot of medications. People taking blood thinners, statins, and antidepressants might not be able to safely use Paxlovid. Plus, Paxlovid resistance is on the rise, meaning it's not working as well as it used to. (To be clear: if you can access Paxlovid and take it safely, it's still a good idea to do so). Without insurance, it's prohibitively expensive. These reasons combined with shortages mean it can be hard to get at all.

So rapid tests are not as effective, the vaccines are not as effective, the antivirals are not as effective, and one-way masking is not as effective...What are we going to do? Well, these are all problems created or made worse by our governments failing us. Unmitigated Covid spread means many more chances for Covid to continue to mutate (and get more dangerous). Our governments are not investing in updating our tools, because they're too busy selling the lie that "Covid is over"/"Covid is endemic"/"Covid is like the flu." We deserve better! It's not fair that all of this is so confusing and so many of our tools are becoming less useful.

But there's still hope! Did you know that the Covid vaccines in Cuba are really effective?

It is possible to do more about this virus! And even though there is more that can be done in the future, there are still things we can do now. We can ask questions about the indoor air quality in the places we spend time, and learn ways to make it better. Opening windows improves ventilation and therefore lessens transmission. And masking is still the best and most accessible tool we have to reduce the spread. Do you still have masks you can wear? Can I help you find more comfortable ones?

“We're all taking rapid tests before the event, so we don't need t wear masks!”

It's good that you're trying to keep each other safe! Sadly though, Covid has mutated and changed so much that Rapid Antigen Tests (most home tests) have high false negative results. They aren't as accurate as they used to be, which is why layering precautions (like testing and masking) is so important. These tests are getting harder to find and more expensive. As a result, most people are no longer testing themselves regularly for Covid, putting everyone in greater danger of getting infected. And besides, we know that people can be infectious with Covid before their symptoms show up. The CDC found that 43.7% of transmission of Covid is asymptomatic, and researchers estimate that at least 50 percent of Covid cases are transmitted from asymptomatic people, meaning you won't have symptoms at all. This is why layering mitigations and wearing masks is so, so important. I'm saying this, because I don't want you to get sick!

"I'm feeling sick, but my rapid test was negative! So I don't need to wear a mask."

Current rapid tests aren't picking up lots of Covid cases. The false negative rate is high for asymptomatic cases. This means it's important to keep testing if you're negative and having symptoms. More importantly: stay home if you are sick! Getting another person sick with Covid could disable or kill them.

Also, did you know you need to swab your throat when taking your rapid tests now, in order to get the most accurate result with the new variants? The tests were designed for older variants. Here's a guide on how to do that.

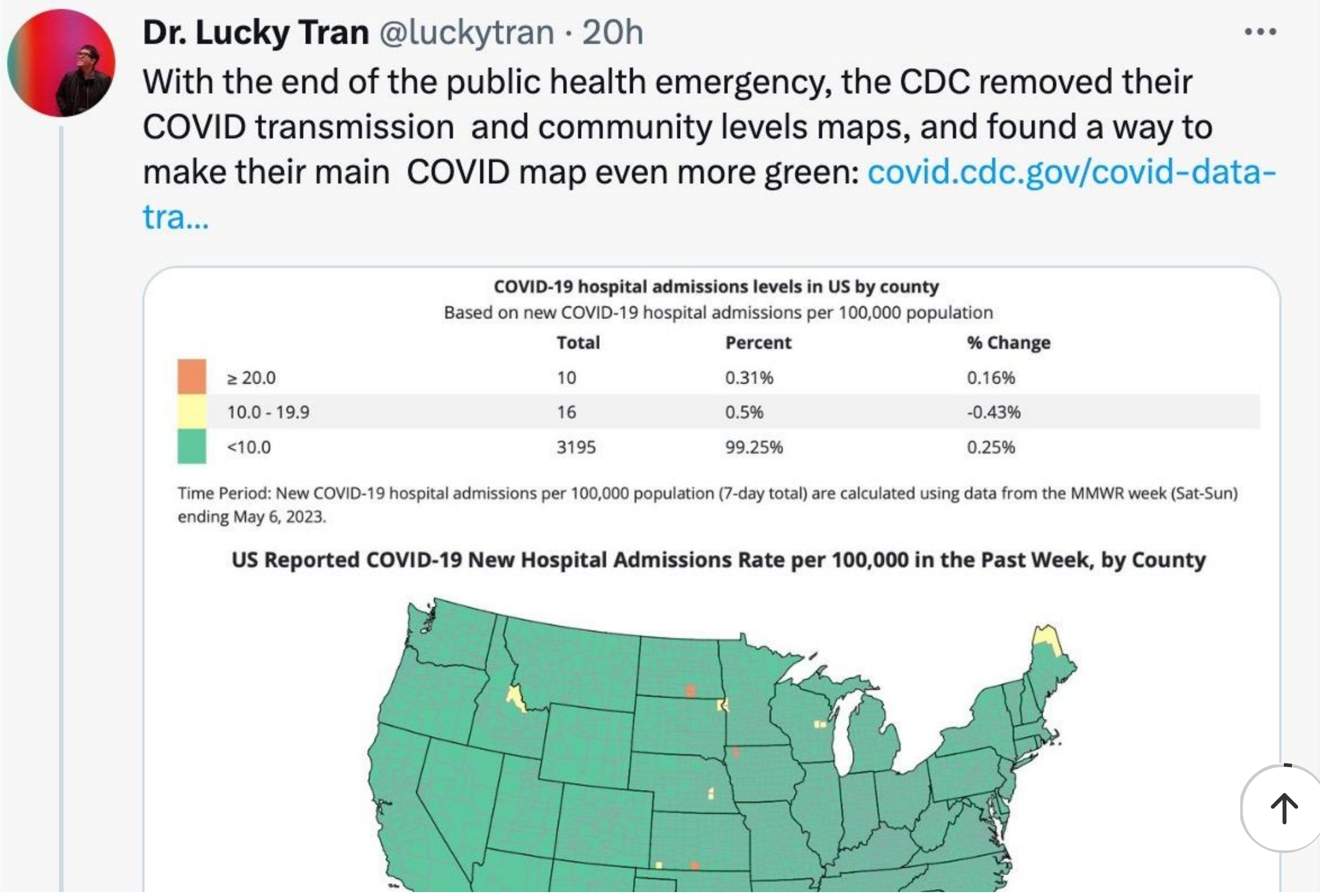
"I don't need to mask because I stay home when I'm feeling sick."

It's really good that you're staying home when you're sick! But also, many Covid cases are asymptomatic, which means you can have Covid and not have any symptoms—but you're still contagious. At least 50% of Covid transmission happens without symptoms. Also, people with Covid-19 are generally considered infectious from 48 hours before any symptoms start (and sometimes, even longer than that). And our Covid tests aren't nearly as accurate anymore because the virus has changed so much. There's no way to know for sure that you or the people around you don't have Covid, so the only way to protect yourself and the people around you is to wear a mask when you're sharing indoor air.

“I'm following CDC guidance!”

The CDC is not an apolitical or infallible institution, and they have been wrong about this virus from day one. Remember when they told us not to buy masks because they didn't want healthcare workers to run out of them? Remember when they said vaccines stopped transmission?

Here's a post that explains how the CDC is actively hiding the data from the public, written by an expert:



Dr. Lucky Tran @luckytran · 20h

With the end of the public health emergency, the CDC removed their COVID transmission and community levels maps, and found a way to make their main COVID map even more green: covid.cdc.gov/covid-data-tra...

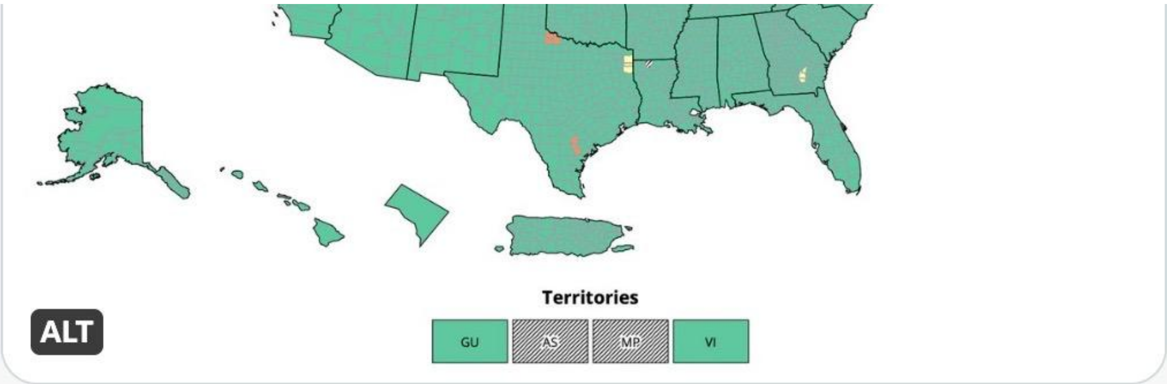
COVID-19 hospital admissions levels in US by county

Based on new COVID-19 hospital admissions per 100,000 population

		Total	Percent	% Change
🟧	≥ 20.0	10	0.31%	0.16%
🟨	10.0 - 19.9	16	0.5%	-0.43%
🟩	<10.0	3195	99.25%	0.25%

Time Period: New COVID-19 hospital admissions per 100,000 population (7-day total) are calculated using data from the MMWR week (Sat-Sun) ending May 6, 2023.

US Reported COVID-19 New Hospital Admissions Rate per 100,000 in the Past Week, by County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Territories
GU
AS
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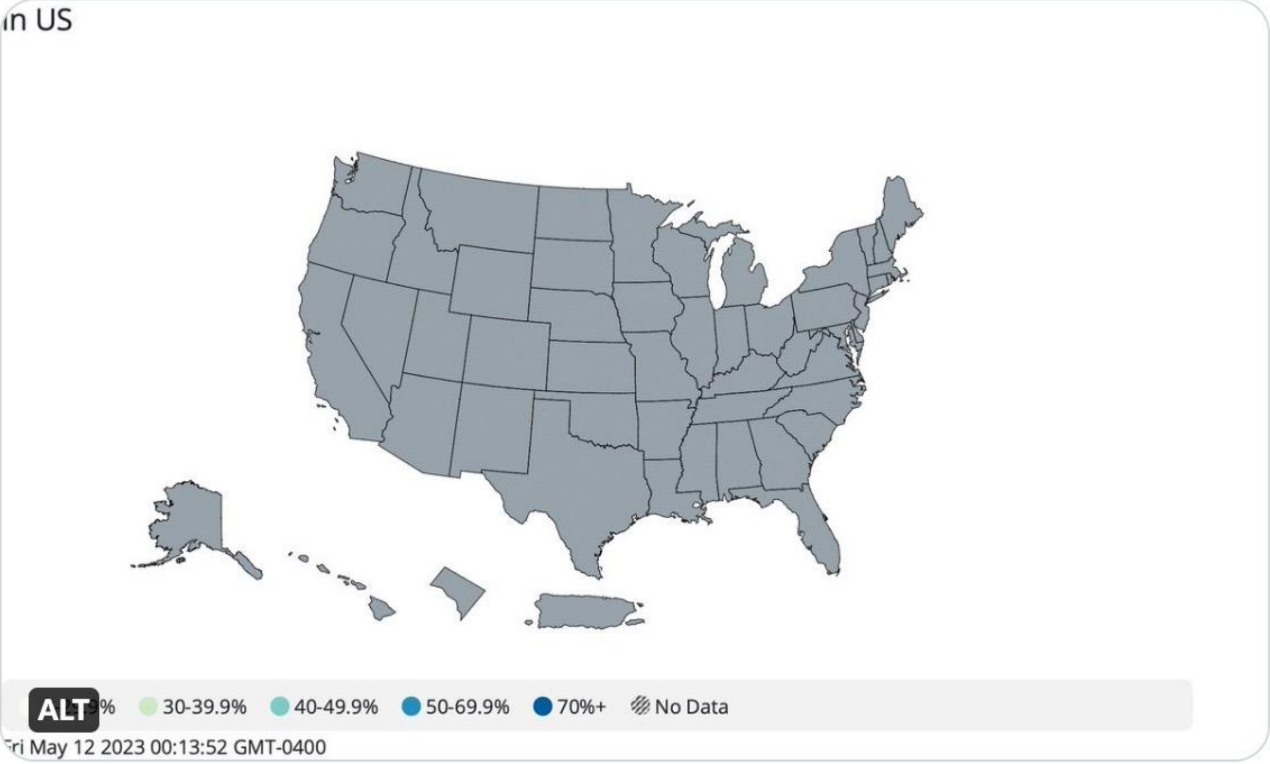
Dr. Lucky Tran
@luckytran

Here's what you get when you go to COVIDtransmissionmap.com

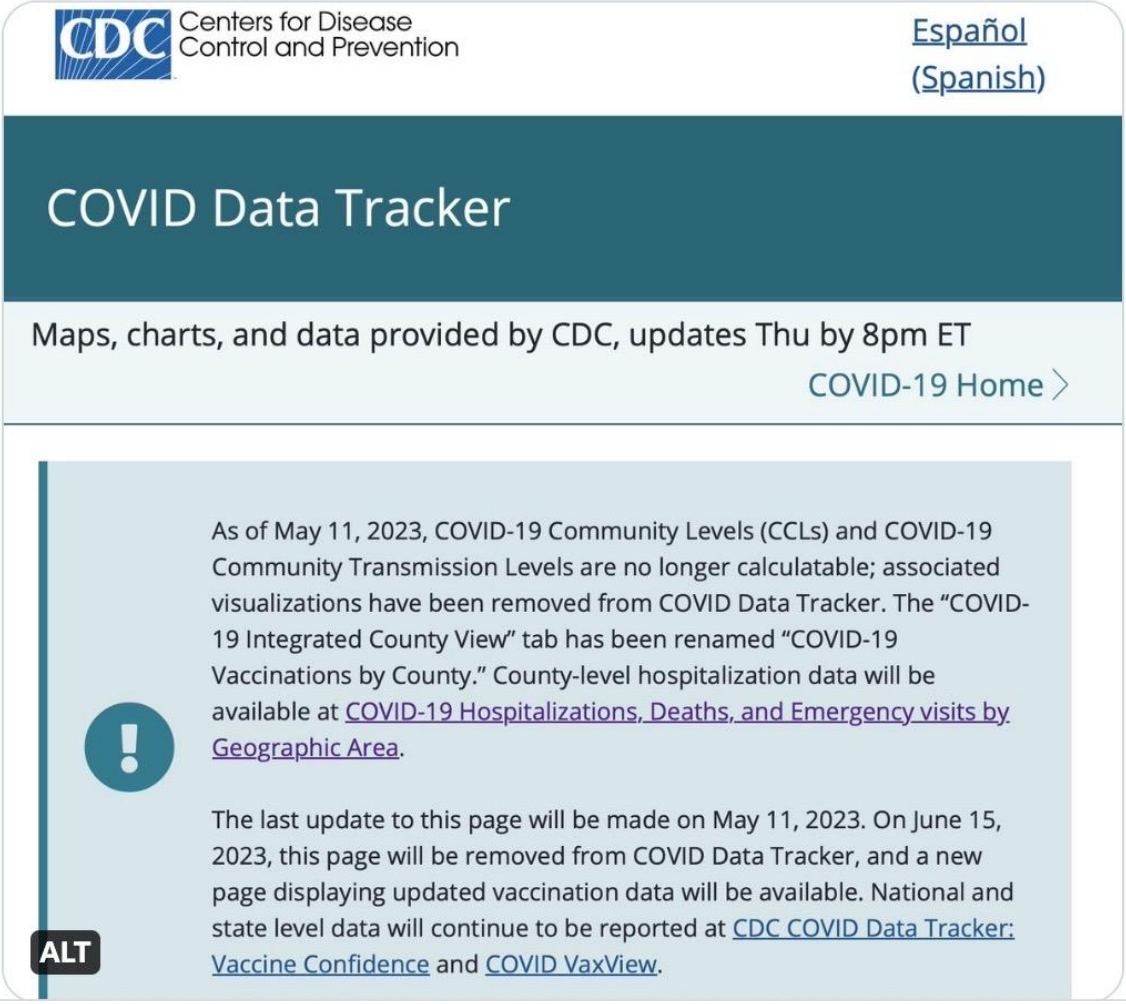
This was a shortcut set up to go straight to the CDC's COVID transmission map (which was already buried on their website to prioritize the misleading Community Levels map).

The case data is now gone.


ın US
ALT
9%
30-39.9%
40-49.9%
50-69.9%
70%+
No Data
Fri May 12 2023 00:13:52 GMT-0400

Dr. Lucky Tran @luckytran · 20h
Note on the CDC page which formerly displayed the COVID transmission map: "As of May 11, 2023, COVID-19 Community Levels (CCLs) and

COVID-19 Community Transmission Levels are no longer calculatable; associated visualizations have been removed from COVID Data Tracker."



COVID Data Tracker

Maps, charts, and data provided by CDC, updates Thu by 8pm ET

COVID-19 Home

As of May 11, 2023, COVID-19 Community Levels (CCLs) and COVID-19 Community Transmission Levels are no longer calculatable; associated visualizations have been removed from COVID Data Tracker. The "COVID-19 Integrated County View" tab has been renamed "COVID-19 Vaccinations by County." County-level hospitalization data will be available at COVID-19 Hospitalizations, Deaths, and Emergency visits by Geographic Area.

The last update to this page will be made on May 11, 2023. On June 15, 2023, this page will be removed from COVID Data Tracker, and a new page displaying updated vaccination data will be available. National and state level data will continue to be reported at CDC COVID Data Tracker: Vaccine Confidence and COVID VaxView.

Source: CDC Statement on their Data Tracker

By saying that transmission levels are "no longer calculable," the CDC is saying: the spread of Covid is out of control. Covid has not gone anywhere; the CDC has abandoned us and left us on our own. The pandemic hasn't ended; the CDC has simply decided to hide the data, hoping the public won't realize what they've done.

This is not OK. We deserve to know how many people in our communities are still sick. They've taken away our tools, and they're leaving us to die. We cannot and should not accept this. Without access to testing, case data, or treatments that work, things are about to get so much worse. The president, the rich, and our leaders still have access to PCR testing and information about the pandemic. Why shouldn't we have these things, too? And why should we ever trust what they're telling us about Covid, wh we know for a fact that they are rushing to cover everything up (while still carefully protecting themselves)?

Consider showing them The People's CDC website and its weather reports.

Long Covid

"Long Covid is psychological, not physical."

Well, first off, this has been a common reaction to many systemic, chronic health conditions that Western medicine has difficulty diagnosing and treating. When doctors don't know what's wrong with someone, a common response is: *are you sure you're not just anxious?* And as a result, people suffer. Yes, it's true that sometimes psychological symptoms (or our states of mind) can contribute to physical symptoms (and vice versa)! Our brains and the rest of our bodies are interconnected and impact each other in complex ways. But there are millions of people suffering from Long Covid, and many of them have shared stories about their debilitating physical symptoms. Long Covid has severe physical impacts. We have so much evidence.

Unfortunately, the idea that complex illnesses are "psychological" is often used to dismiss people whose symptoms aren't easily explainable or treatable. It's also deployed whenever someone's disease has many contributing factors that show up differently in different people. It's especially weaponized against people with marginalized identities; disabled people, racialized people, queer people, and women are often not believed by their doctors and their pain is minimized or erased. For example, sufferers of diseases like Chronic Lyme Disease and Chronic Fatigue Syndrome have had their symptoms dismissed for decades.

Next steps

In the case of Long Covid, scientists are developing hypotheses that could provide physical explanations for Long Covid. Right now, there are three leading theories about physical explanations for Long Covid. Right now, there are three leading theories about the physical cause:

Persistent virus theory

Some researchers have detected “viral persistence” in people experiencing symptoms of Long Covid. Viral persistence means that the body has been unable to fully clear the virus after infection. Meaning: some people get Covid, and it doesn’t go away. Researchers have found it hiding out in certain organs and tissues in the body, long after the person was first infected. GI doctors and scientists have discovered Covid lingering in the digestive tract in several people (and other researchers have found it hiding elsewhere). This is really bad.

Viruses that live in the body for long periods of time can sometimes be reactivated years down the line. The shingles virus is reactivated chickenpox. This is what is called a “post-viral illness.” Long Covid is not the only post-viral illness, it’s just the newest one. In fact, post-viral illnesses are way more common than you might think. Lots of viruses can cause lasting damage, like autoimmune diseases, chronic fatigue syndrome, vision loss, and more.

Tiny blood clots theory

In some Long Covid cases, the cells and tissues that control blood flow are damaged in a way that amplifies the blood’s tendency to clot. This theory suggests that very small blood clots (which have either been left over from the initial Covid infection itself or formed in the aftermath) might be gumming up the body’s circulation. Researchers found evidence of these microclots when using specialized scans that looked at blood flow in the lungs. Many researchers now believe that Covid is actually a vascular disease, and this theory supports that idea. And the thing about microclots in your blood is that they can cause damage everywhere: from your brain, to your joints, to your organs.

Haywire immune system theory

The third theory is that Covid is making immune systems go haywire. In some Covid-19 patients, their immune systems get revved up and destabilized by the initial attack by the virus—and these immune systems seemingly can't reset themselves to their former baseline, idle state.

Why does this happen? Well, researchers found that white blood cells (which normally recruit other cells to sites of infection) were highly activated in Long Covid patients. And this activity might explain why patient levels of interferons (proteins made by the body to fight invaders) were sky-high even 8 months after infection. Even worse, these patients had many inactivated T-cells and B-cells (which usually hang around and wait for instructions to attack disease). All of this is bad, because it signals chronic inflammation, which can cause a ton of different health problems and conditions.

Regardless of the physical cause, the latest estimates are saying that Long Covid affects about 30 to 40 percent of people who have had Covid. And the actual number could be much higher, because many people are not able to access healthcare or seek treatment.

Every Covid infection increases your risk of developing Long Covid; each time we get sick, we're rolling the dice and risking disability. That's why I'm still wearing a mask. I can't afford to get sick and stay sick.

Sources

- "What causes Long Covid? Here are the three leading theories" -*Science*
- "Postacute COVID-19 is Characterized by Gut Viral Antigen Persistence in Inflammatory Bowel Diseases" -*Gastroenterology*

Further reading

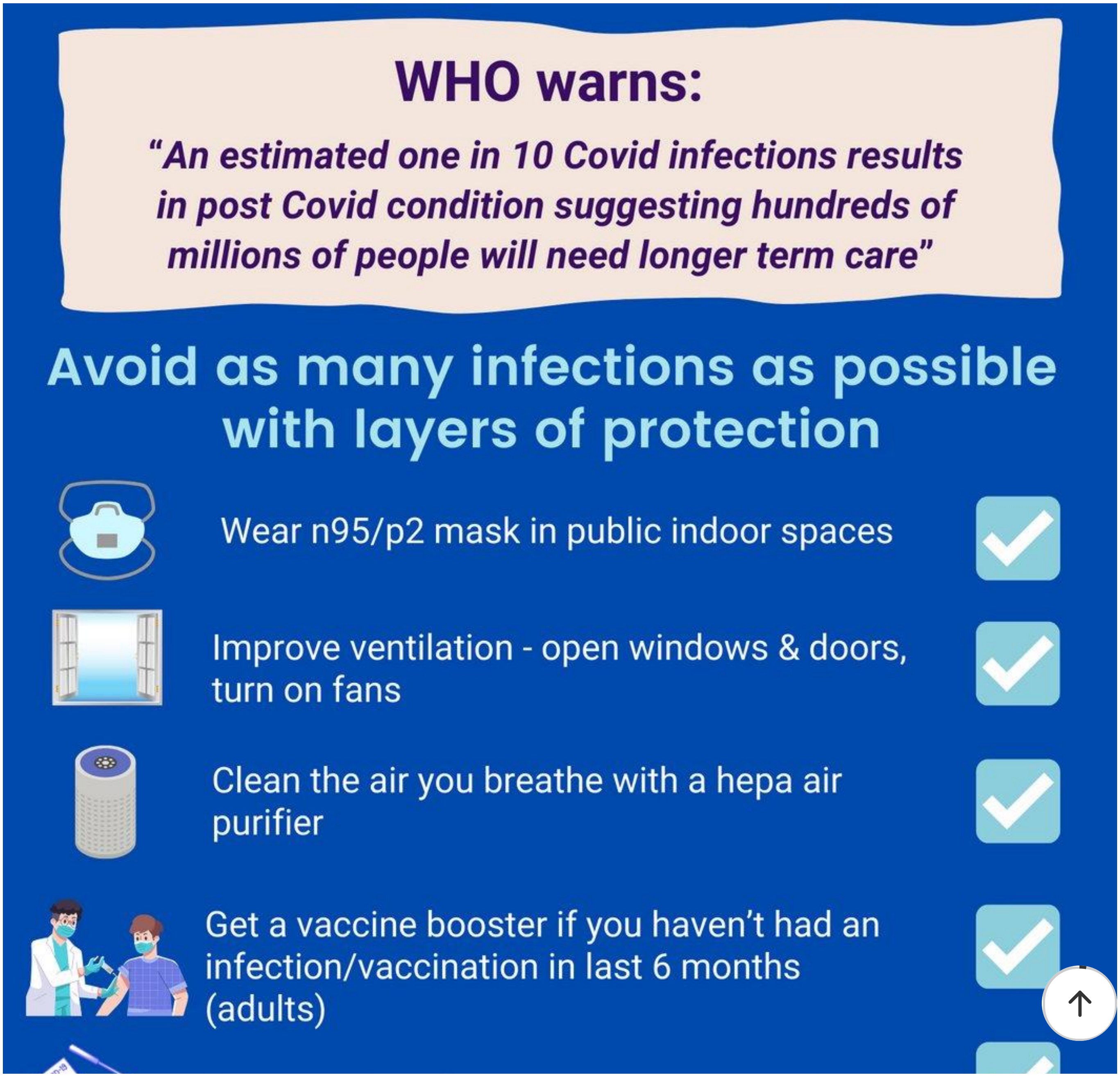
- "It's in the blood: Researchers discover new way to diagnose long-COVID" *-CBC News*
- "Long COVID or Post-acute Sequelae of COVID-19 (PASC): An Overview of Biological Factors That May Contribute to Persistent Symptoms" *-Frontiers in Microbiology*
- "Biomarkers in long COVID-19: A systematic review"*-Frontiers in Microbiology*
- "The blood markers that could help to diagnose long COVID"*-Nature*

“Long Covid is physical, but not a big concern.”

Long Covid is an umbrella term that encompasses a wide range of symptoms and newly onset conditions that can be completely debilitating for some. As of right now, there’s no cure. There aremany estimates of the prevalence of Long Covid ranging from 5% to 50% of infections (with varying degrees of severity and debilitation). Finally, in April 2023, the World Health Organization came out and warned that 1 in 10 infections can result in Long Covid, “suggesting that hundreds of millions of people will need longer term care”. I know people with this condition, including close friends. They’re suffering a lot. They’ve had to reorganize their lives. Many of them are out of work or unable to do the things they used to do for fun. It’s really, really worth avoiding this disease. And from everything we know so far, Long Covid isn’t actually rare.

It’s important to clarify the distinction here: they’re now saying **1 in 10** infections lead to

Long Covid, not 1 in 10 people who get Covid. This means that every time you catch Covid, you're rolling the dice again, on a serious disability! And don't forget: reinfections are way more dangerous than initial infections. Remember: there is *no* permanent immunity to this virus, and it's possible to be reinfected within a very short timeline. Most infections are asymptomatic, meaning it's very likely for someone to catch Covid and not know, because they won't have any symptoms. This is why I tell people: I don't know if I've had Covid or not. If we don't take steps to stop the spread, we are going to keep giving this dangerous virus opportunities to mutate, get stronger, and change, meaning we'll all be more at risk of getting it over and over again. The best way to stay safe is to mask up.

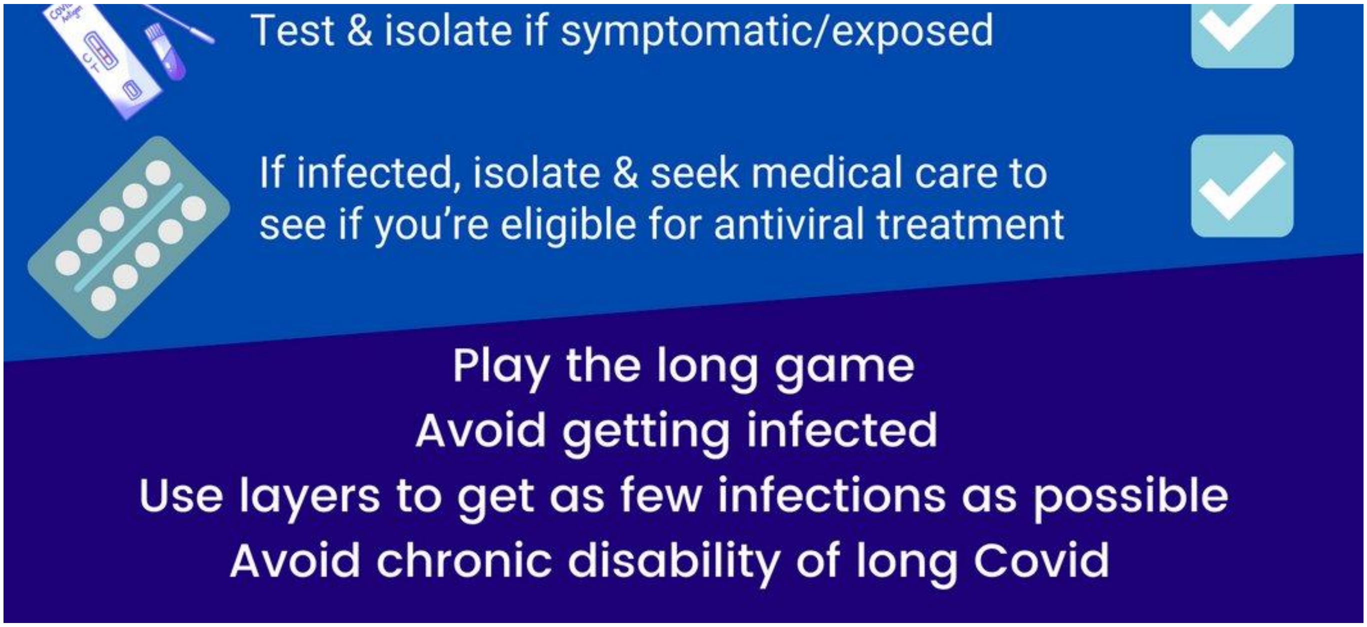


WHO warns:

"An estimated one in 10 Covid infections results in post Covid condition suggesting hundreds of millions of people will need longer term care"

Avoid as many infections as possible with layers of protection

- Wear n95/p2 mask in public indoor spaces ☑
- Improve ventilation - open windows & doors, turn on fans ☑
- Clean the air you breathe with a hepa air purifier ☑
- Get a vaccine booster if you haven't had an infection/vaccination in last 6 months (adults) ☑



Test & isolate if symptomatic/exposed ☑

If infected, isolate & seek medical care to see if you're eligible for antiviral treatment ☑

Play the long game
Avoid getting infected
Use layers to get as few infections as possible
Avoid chronic disability of long Covid

A report released in March 2023 by Canada's Chief Science Advisor, Dr. Mona Nemer, indicated that Long Covid could be a mass disabling event. (Link to full report)

Excerpt:

> Acute infection in around 10-20% of individuals leads to a complex and, at times, debilitating chronic condition in some individuals, known as post-COVID-19 condition or long COVID. Additionally, it is increasingly evident that acute COVID-19 increases the risk for several chronic cardio-metabolic diseases, including diabetes, hypertension and arrhythmia.The long-term effect of COVID-19 on the nervous system is equally concerning with accumulating evidence that several common symptoms reported by individuals suffering from PCC (Post COVID-19 Condition), such as memory loss, blurred vision, mood disorders and neuropathies, may reflect irreversible cellular changes observed in aging or in some neurodegenerative disorders. Thus, PCC has the potential to become a mass-disabling event given the highly transmissible SARS-CoV-2 Omicron variant in circulation and the unpredictability of evolving future variants

-Dr. Mona Nemer

Also, if you want to see a group of folks taking the risks of Covid and the economic implications of Long Covid as a mass disabling event *very* seriously, just check out Covid coverage in business/finance publications. Here, you'll find accurate portrayals of the risks of Covid provided to wealthier classes worried about shrinking workforces.

(📝 read the feature articles, not the opinion section. The opinion section isn't fact-checked)

Here's an article that gets into this more, and see also the "Case studies" section of this document.

Further reading on Long Covid

- "Why Long COVID could be a ticking time bomb for public health"-*Salon*
- "A Social and Medical Examination of Long COVID as a Mass Disabling Event"-*World Socialist Web Site*
- Interesting Twitter thread on "the infectious origin of cardiovascular disease hypothesis"

Mental health

"What about the detrimental effects of isolation from missing out on events?"/ "Socializing is important for my mental health"/ "Being the only person wearing a mask triggers my social anxiety."

Yes, missing out on events or standing out from the crowd have negative effects on our mental health. Humans are, in general, very social so there is definitely a real challenge and struggle there! I have had some painful moments turning down certain events. I have cried and grieved over some of these changes in my life.

However, there are many ways to contribute to Covid mitigation without isolating yourself, like socializing outdoors, masking in crowds and indoors, and looking for indoor spaces with good ventilation.

In terms of being the only person masked, it has really helped me connect with others who I know are also masking in public. So, even if I enter a public space by myself and am the only one masking, it doesn't feel as difficult when I know I'm actually not alone in taking action like this. Does that sound like it could help you with difficulties standing out?

Like I said, we're such a social species! But right now, high-risk people are being forced to stay home and away from almost all events due to lack of protections in place. Every action counts, so while there have been low points, it has also been a boost to my mental health to know I am contributing to making public spaces safer. When more of us do that, there will be more opportunities for socializing for more people!

Some of these choices are a sacrifice, but I'm trying to protect my baseline health, as well as my community members, so we can live long and healthy lives. I know that my mental and physical health are connected, and that if I end up with a lifelong disability that limits my ability to exercise or work, my mental health will be much worse.

Next steps

You could go back and forth, sharing feelings like, "As someone who wears a mask every time I'm in public, I feel judged and alone. I wish I didn't feel that way. Sometimes, though, people see me wearing my mask and pull one out of their pocket to wear around me, because they just didn't want to be the only person wearing one.

Do you think maybe a lot of the people who aren't wearing masks want to start do
so again, but are afraid of what other people might think? Do you think that if more of

so again, but are afraid of what other people might think? Do you think that if more of us wore masks, it would make it easier for the people who are high-risk to keep doing so without being targeted?” or “Sometimes people tell me that starting precautions again feels like admitting they made a mistake or hurt other people. They feel like they can’t admit to having been wrong about Covid.

Another option, if you personally stopped masking at any point

I also stopped wearing a mask for a while indoors, but it’s a sign of strength, not failure, to change your mind when presented with new information. I wonder if you’re being hard on yourself for not knowing these things, and that could be making it harder to make a change—but it’s not your fault you didn’t know, and you were doing the best you could. Here’s some testimonies from (amazing!) people who have also resumed masking: The_Gloria_Sun and Chescaleigh.

“I have to live my life.” / “I’m not just going to sit around and do nothing.”

I am living my life! I go to art museums, travel, spend time with friends, and even eat at restaurants sometimes (on the patio!). But whenever I’m indoors sharing air with other people, I’m wearing a high-quality mask, because I can’t tell by looking at someone else if they’re immunocompromised and I don’t want to get them sick.

Remember: many Covid infections are asymptomatic, which means it’s very possible to be sick with Covid and not feel or show any symptoms at all. And if you’ve had Covid, your immune system IS compromised now. I’m doing this to protect my health and the people around me, too. When I eat at a restaurant, I sit outdoors on the patio or get takeout. And even if you can’t wear masks all of the time, wearing them some of the time—like at the grocery store or on public transit—is better than not masking at all. Do you need help finding a good mask to wear?

See also: this section below.

“Wearing a mask is living in fear.”

What makes you believe that wearing a mask is living in fear? Taking precautions to preserve our physical and mental health in other ways isn’t viewed as living in fear.

Does the person you are speaking to do any activities to preserve their health in some way? Ask them if the activities they enjoy doing or do because they care about their health in other ways would also be considered living in fear. Would you say working out is living in fear? Is trying to eat healthy living in fear? Is brushing our teeth living in fear? Is playing sports living in fear? Is meditation living in fear? Is good sleep hygiene living in fear? Is playing or listening to music living in fear? All of these activities could be viewed as something many people do to enrich our lives and not as hindrances. Many of these activities are to help preserve our health in various ways. Is being an active participant in our own health and well being living in fear? Wearing a mask to protect ourselves isn’t living in fear; it’s an act of self care (and community care).

Freedom / government control

“Wearing a mask infringes on my freedom.”

What about your freedom to live to old age? What about your freedom from getting sick over and over again? I wear a mask because I’m protecting my own right to live and be healthy. I don’t trust the government to keep me safe, because the government doesn’t care whether we live or die. They want us to go back into the workplace and back to spending money so the economy doesn’t collapse, not because things are any safer than they were in 2020.

“Masks are attempts at government control.”

Wearing a mask is actually going against what the government wants us to be doing right now! It's also a great way to protect yourself from facial recognition software and protect your privacy. Attempts to ban masks in businesses aren't about shoplifting, they're about surveillance and limiting your bodily autonomy.

Vaccines

Talking to your friends and family about vaccines can be an especially emotional topic, and is one that takes time. It's important to ask a lot of questions and get to the root of their concerns. Focus on shared values and be patient. You'll probably hear a lot of popular anti-vax points repeated initially. Continue to discuss with them and try to find out what is underlying their concerns in their own words.

It is particularly important to come well-informed to these conversations about vaccines. Familiarize yourself with the technology and history of vaccines in general and the different types available for Covid in your area. That way, you can identify incorrect information and be ready to recommend a specific vaccine if they ask.

"Vaccines kill more people than Covid."

You can't catch Covid from the vaccine. While you may feel sick after getting the Covid-19 vaccine, that is a sign your body is building protection against the virus that causes Covid-19. A controlled dose of part of a virus is not worse than an uncontrolled infection with a fully operational virus. Can you tell me more about your hesitation here, and what your main concern is?

"This was just a scam for big pharma to make money off of us!" "The vaccines aren't safe!" "We don't know the long term side effects of the vaccines!" "mRNA is a new technology!"

Unfortunately, it is true that we live in a predatory society. But the truth is that the predatory aspect is the cost and patenting of drugs; it's not true that all drugs produced by the pharmaceutical industry are useless or harmful. People who have chronic health conditions who rely on medication to live (such as insulin) are placed in an impossible situation in our society. They have no choice but to rely on these drugs at whatever cost the pharmaceutical industry decides otherwise their life is at risk. Can you tell me more about your hesitation here, and what you're most worried about?

If Novavax is an option and they are skeptical about mRNA

Did you know that Novavax is not an mRNA vaccine? If you were skeptical about mRNA vaccine technology, you should look into getting Novavax instead, which relies on more traditional vaccine tech.

"Why should I get vaccinated?"

Thank you for trusting me enough to ask this question! It's good that you're thinking about your health, and it means a lot to me that you feel safe enough with me to ask. So basically, when looking at any medication, we have to look at the risk/benefit analysis, right? In this case, that means: What are the risks of not being vaccinated? And for people who aren't vaccinated against Covid, there's a higher risk of Long Covid and higher risk of being hospitalized if you get infected. Even though Covid has mutated greatly, the vaccines still do provide some protection and help our bodies if we become infected. Sadly, governments around the world have restricted access to testing, making it harder for people to know how much Covid is around them. But by looking at wastewater data, hospitalizations, and deaths, we know that Covid is still running rampant in our communities.

While the Covid vaccines do give our bodies a head start if we are infected, they are not as effective as they once were. It is important that we see vaccines as an added layer of precaution and not as a safety net.

Insert your personal connection to Covid. Do you know people who are currently sick? Did *insert your personal connection to Covid. Do you know people who are currently sick? Did you recently have Covid? Share this story.*

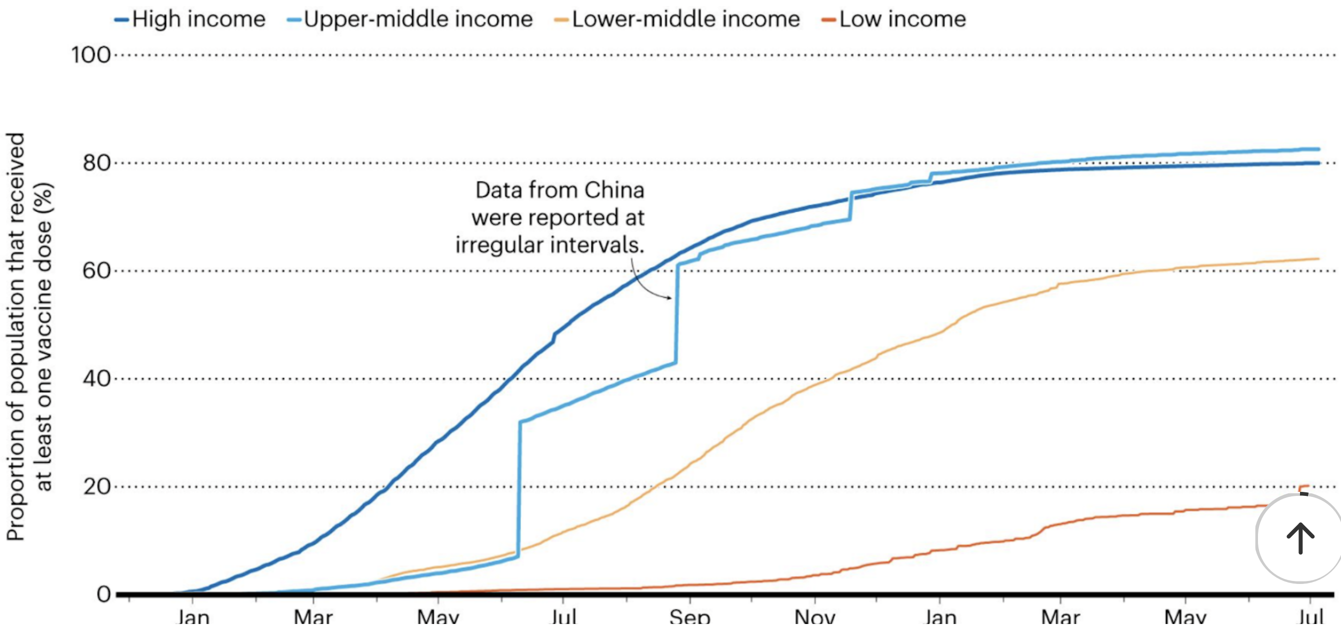
The damage Covid is capable of doing to our bodies is much, much greater than the risk of an adverse reaction to the vaccines. If you're nervous about having a bad reaction to the vaccine, the best thing you can do is talk to your doctor.

If they are thinking about maybe getting vaccinated, offer to go with them as a support person.

"How do we know they are safe?"

The peer review process for vaccines is extremely in-depth. To get rid of bias, the scientists' names have actually been removed, and their research passes through many hands and stages before it can be considered peer-reviewed. The peer review process creates a standard in the scientific community which proves the integrity of the study. Drugs like insulin save millions of lives every day.

And as for the Covid vaccines, they have been given primarily to the wealthiest countries (even hoarded for them). That wouldn't have happened if they weren't extremely safe. And many countries are still fighting to access the vaccines. Lack of access to the vaccines has led to additional Covid deaths.



It's not just Covid vaccines, either. Other vaccines (like ones for the flu), HIV treatments, and even antibiotics or other medical treatments we might take for granted have seen massive delays in availability and limited accessibility in the Global South. Would you be interested in learning about what some of these countries are doing to try and improve their own production of medicine so they don't have to rely on the charity of rich countries?

About mRNA

mRNA technology was first discovered in the 1960s, and testing with mRNA technology began in the 1990s. Several vaccines were being studied with this technology, including a flu vaccine and a rabies vaccine. Currently, even more vaccines are being studied with mRNA technology, including vaccines for cancer and HIV. The Covid vaccines are based off of the mRNA vaccine that was being produced during the SARS epidemic in 2003. What does this mean? It means we have several decades worth of testing and information regarding mRNA vaccines and the Covid vaccines. They're not brand-new; they were built from existing research and pre-existing technology.

The Covid vaccines have been extremely well-studied. Pfizer's trials had over 43,000 participants and Moderna's vaccine trials had over 30,000 participants. We have a lot of data showing that these vaccines are safe for the great majority of people who receive them.

Most side effects from vaccines happen within the first few days. The most common side effects are mild, and you may feel under the weather the following day. These symptoms happen as the result of a normal immune response, which helps your body recognize the pathogen without becoming infected. This gives your body a head start in being able to be able to fight against Covid, if you were to become infected.

Long-term effects from pharmaceuticals happen when people take medications continuously (often daily) for extended periods of time and build up in our bodies. This is very different from vaccines, which degrade quickly in our bodies. Vaccine injuries are a real phenomenon, but they are very rare and would be something that would present quickly, not something that would show up over months or years. What we do know, however, is that Covid can cause long-term damage to our bodies and we don't know what the future holds for the impact of a novel virus infecting the vast majority of the population repeatedly. Many viruses can stay in your system after infection and can become reactivated later. This is why those who have been infected with chickenpox are at risk of developing shingles later in life. We are already seeing health impacts from Covid infection only a few years into this pandemic. We don't know what the future holds yet, and we need to prevent everyone from being infected over and over.

Further reading

- The Long History of mRNA Vaccines
- Vaccines for Covid-19–Most Studied in History–Dr Norman Swan
- Is the COVID-19 Vaccine Safe?
- Three things to know about the long term side effects of COVID Vaccines
- Different types of COVID-19 vaccines: How they work–Mayo Clinic

"Aren't the pharmaceutical companies still profiting off of us?"

Vaccines only account for a very small percentage of profits from pharmaceutical companies; preventative medicine is not much of a money maker. Pharmaceutica companies make most of their money from exploiting people with chronic illnesses, since these people rely on ongoing treatments that they need to live. If you are concerned about big pharma profiting off of you, the best thing you can do is wear a well-fitted respirator to prevent catching Covid or other illnesses, which could leave you disabled and possibly reliant on pharmaceuticals for life.

Next steps

For some time, governments around the world have been pulling back on resources for Covid, such as testing and sick leave. More recently, governments have been restricting the availability of Covid vaccines. The U.S. government is no longer providing free Covid vaccines. In the UK, children are no longer eligible for vaccination. Both in the UK and Canada, only those who can prove they are immunocompromised and those above 65 are eligible for boosters. This is not because Covid is no longer a threat; it is because governments are turning this into an individual problem and putting the burden (wrongly) onto us. Basically, they're trying to absolve themselves of responsibility for keeping us safe. What they should (and could) be doing is investing in infrastructure. They should be providing funding for schools and businesses to upgrade ventilation and clean the air. They should be passing legislation around sick days. They should be offering us free masks, free vaccines, and free tests. The government has the power to do so much more to protect us. They don't want to pay to do that, so they're telling us the pandemic is over. It's not over.

“Why are there some doctors and some health/nutrition/fitness influencers telling me I don't need to get vaccinated or wear a mask?”

The truth is, there are some doctors and influencers with no moral integrity. There is an overwhelming consensus in the scientific community that the Covid vaccines are safe and do help prevent hospitalizations (during the acute phase of an infection). There is a small minority of people (sadly, including some doctors) who have been purposely lying to you about vaccines because they are looking to sell you a product (like supplements). These people will tell you that you don't need to get vaccinated unde the guise that their supplements will keep you healthy and/or that these supplements will "treat" you after you get Covid. Some of these influencers and doctors have investments in alternative treatments. Remember: treatments are what get you coming back frequently. They want you to be sick and reliant on their products.

The Environment

"Wearing masks is unnatural."

Handwashing used to be considered unnatural! Viruses are natural, but they're still a danger to human beings. Just because something is natural does not mean it's safe, or that we shouldn't protect ourselves. Tobacco plants are natural but we know tobacco causes cancer. Capsaicin found in hot peppers can cause your eyes to swell shut, burn, and cause nerve damage. Forest fires are natural, but we evacuate if one is heading toward our house!

Also, did you know that human activity around the world has been bringing Covid to animals? It's sad, and it's true. Our pets—such as dogs, cats, hamsters, and ferrets—are all capable of catching Covid. They can't protect themselves, but we can protect ourselves for them.

Humans have been encroaching more and more on wildlife and Indigenous land through predatory development like deforestation and mining. Animals we once thought could not get Covid seem to be catching Covid, giving the virus more chances to mutate. There's been documentation of Covid spreading to minks, otters, deer, lions, tigers, hyenas, hippopotamuses, and the endangered snow leopard. So if you care about the environment, it's important to stop Covid transmission from happening; it's affecting our entire ecosystem.

And like I said: virus mutations are constantly happening. But when viruses jump to different species, there is even more reason for serious concern. When new speci catch Covid, we're put at a higher risk of mutations that could make Covid even mo deadly or transmittable. And that could further comprise our already-waning vaccines and treatments.

Protecting our pets and wildlife from Covid is so important. Disrupting the balance of our ecosystems could have dire consequences. Our existence relies on many ecological factors, and we are part of nature, too. The more we allow Covid to spread, the more likely it is that animals and wildlife will be exposed to Covid, threatening both their survival and ours.

“Aren't disposable masks bad for the environment?”

First of all, it’s important to remember that human life is our main consideration. Single-use disposable products used in infection control (like latex gloves) save the lives of both people and animals every day. Other disposable and single-use products can be necessary survival tools for disabled people. So while yes, disposable masks aren’t the most environmentally friendly objects, there are things we can do to reduce the impact. It’s possible to safely re-wear disposable masks (see: paper bag method), and there are reusable masks you can get which have less waste.

Unfortunately because of the world we live in, we all produce waste. It is important to keep in mind that the biggest contributors to climate change can be boiled down to about 100 corporations and the US military. Our governments directly profit from passing loose and flimsy regulations on fossil fuels (and their manufacturers) and pollutants in our environments. We have the technology and power to live in a much more eco-friendly, sustainable society, but there hasn't been much movement because of the power these corporate interests have over the government.

You don't blame yourself for purchasing essential needs that come in packaging, do you? I didn't think so. So blaming individuals for wearing a mask doesn't really make sense. We need to keep in mind who we should really be holding accountable for keeping our environment free of pollutants, and blaming each other isn't the solution.

Further reading:

- “Just 100 companies responsible for 71% of global emissions, study says” (The Guardian)

- “US Military Pollution: The World’s Biggest Climate Change Enabler” (Earth.org)

- “Military Organizations Produce Significant Amounts of Unreported Greenhouse Gases” (PBS)

How to talk to organizations or event organizers

Are you trying to bring back masking and other precautions to an event or space? Have you been struggling to have a conversation with event members or group organizers? Let's walk through how to get started.

First off, we need to ask ourselves some questions. Does this event or organization have radical politics? Does this organization have a website with mission goals and objectives? Who is this event or organization serving? Are they serving marginalized communities who are at a greater risk of adverse effects from Covid? Do they state that they are fighting against ableism and/or that their space is accessible? Do they have monetary resources to provide masks, air filtration etc? Are they a volunteer-run organization?

When talking or writing to organizers, don’t make assumptions about what you think they know about Covid or masking, even if they supposedly have radical politics. It’s important to name who they are leaving out and putting at risk by not having masking requirements. People often have more empathy for a situation when we put a face to those being left out or hurt by their actions. Tell them how it makes you feel and explain how people in your community are left out by the organization’s decision to not to require masking.

Consider the following: If this group is volunteer-run, are they able to factor in the costs of masks into the event price? Can they request donations to make safer events? Do you know any local organization who may donate masks or money towards creating a safer event or space? Are you able to gather names in the community who would support having masks in this space or event? For organizations that have plenty of resources, it should be solely their responsibility to provide an accessible space and/or event. Volunteer-run events or organizations are more complex. They may be much more open to the suggestion of masks with assistance since their resources may be scarce or non-existent.

Below is a real life example of a letter written to a volunteer-run, anti-capitalist art collective that also hosts shows, workshops, and other events. Feel free to use this as a template to mold your own letter or conversation to organizers.

> Dear (Organization/Group)
>
> We are reaching out in regards to Covid precautions in the space. (Organization) has been a place of inclusion for anti-capitalists and a space that people have been able to access for different community needs [Talk about your personal connection to organization, why you care about masks being required in their space at their events or how you've participated in their events previously].

> On your About Us section on your website, you state:
>
> -quote from website regarding how they challenge ableism-
>
> Unfortunately, when (organization) dropped mask requirements, the space stopped living up to this goal. This space has shut out disabled people and those who are trying to keep themselves and their loved ones safe. Marginalized people such as those with chronic illness, disabilities, racialized people, and 2SLGBTQIA+ folks are at a higher risk of adverse outcomes from Covid.

> While no one can live in a completely risk-free world, we are asking (organization) to commit to a harm reduction approach (masking & air filtration) because we believe that everyone deserves human connection, resources, and community space and we hope you do too.

> We are reaching out because we want to know if the collective is open to reinstating mask requirements for all shows, workshops, and open hours. We would be willing to pitch in on masks and help set up some budget & effective air filtration options for the collective, if you're open to our request.

> If you are looking for any info on Covid, masks, or how to create a safer space with air filtration, please don't hesitate to reach out, and let us know what your decision is. We hope you are open to suggestions and look forward to hearing back from you.

We also recommend this excellent piece which provides suggested answers to many of the movement specific objections you might encounter.

Hope

“I don’t want to wear a mask forever”

It helps to remind people that no one is asking them to mask FOREVER. We are as g
them to mask until the pandemic is actually under control and until it's safe to stop

them to mask until the pandemic is actually under control and until it's safe to stop masking. And so reminding them that treatments and better vaccines are in development can make this psychologically easier/assuage people's fears to some extent. Taking things one day at a time can be very helpful, too.

Some good news

- A nasal spray developed in Finland protects against infection, including recent immune-evasive variants. When administered nasally the experimental molecule—TriSb92—developed at Univ of Helsinki blocks transmission and spread of Covid. (March 2023)

- Here's a great Twitter thread featuring some examples of policy shifts and research wins

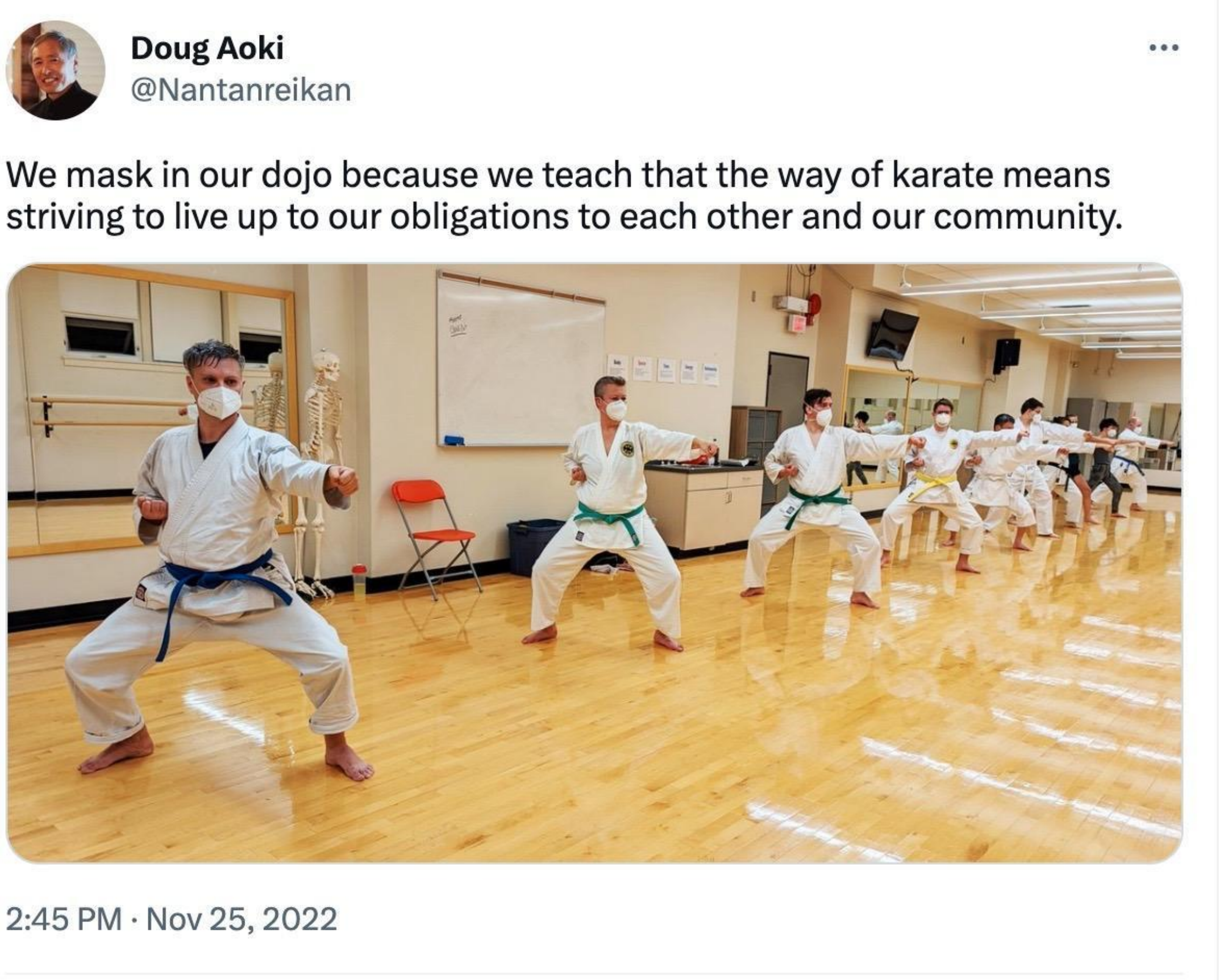
- Another nasal spray seems to provide some level of immunity and prevent transmission in non-human animals (including primates)

Proof that you can still live your life and wear masks

- really lovely video from ji-youn kim 김지연 showing how they still participate in in-person activities (art galleries, social events, going shopping, etc.) while wearing a high-quality mask indoors

- @mask4maskjoy dedicated to proving that "Events & collective spaces can be both Covid-safe AND fun, joyful, sexy, debaucherous, connective! Share your storie images to show what's possible."

- People are still going to host celebrations, game nights, birthday parties, etc.



Doug Aoki
@Nantanreikan

We mask in our dojo because we teach that the way of karate means striving to live up to our obligations to each other and our community.

2:45 PM · Nov 25, 2022

Show them this account to let them know it is possible to gather safely.

- Check out Covid conscious groups in your city or town on Facebook (often called "Still Coviding" groups) They often share local events or do things as groups

More useful resources

Individual sources

- CovidHelp.org is a simple guide that you can share with friends and family to explain the basics
- T Cells 101 is a guide that explains how Covid harms T cells (and our immunity)
- What to Do When I Have Covid: a Covid+ plan for navigating infections (by Clean Air Club)
- Here's a guide to CO2 monitoring (how it works, why it matters, how to do it).
- SARS-Cov-2 and Textbook Immunity: a great primer resource on Covid and the immune system
- Here's a great list of additional talking points and rebuttals for conversations with leftists and progressives: "WHY PROGRESSIVES AND LEFTISTS NEEDED TO WEAR A MASK SINCE YESTERDAY"

Compiled resources

- The Long Covid Research Library–this searchable online library contains many of the important papers that have been published on Long Covid
- Covid Protection Guidelines for Groups
- A FAQ with 17 common myths and questions about HEPA filters that explains w they're so important: HEPA Filter FAQ by Joey Fox

- Here's a massive list of all of the athletes and famous people who have Long Covid (with sources).

- Here's a collection of articles debunking the idea of "immunity debt" (some more reputable than others–but choose the one from the news source that the person you're talking to is most likely to read / listen to)

- Here's a list of places to buy/obtain high-quality masks

- Savewo is another great mask supplier

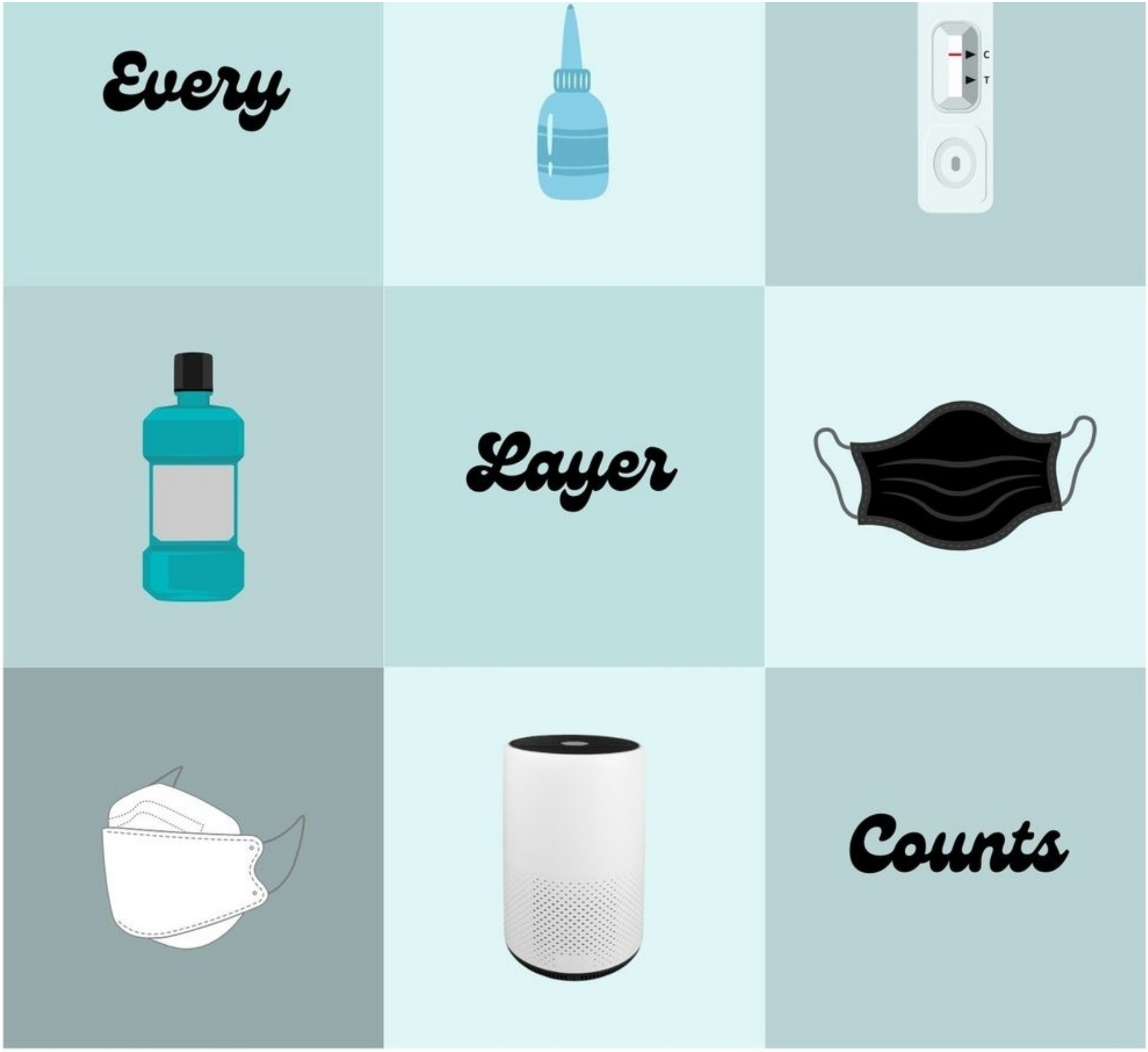
- Here's a Covid zine library!

- Looking for mental health support? The COVID-Conscious Therapist Directory is a great resource.

Visualizing transmission

Here's an interactive flow chart where you can adjust variables and visualize how transmission happens (and how quickly) in indoor or outdoor spaces. Keep in mind that this resource is from 2021. With the new variants, transmission happens more quickly. But this is still a useful visual tool for explaining how transmission happens.

Extra mitigations



Everyone should know about additional mitigation strategies that can be layered into their routine for further protection from Covid. Respirators are by far the best tool we have now, but there are other mitigations that can be added into our routines for additional safety.

Here is the unfortunate truth: some people in our lives are not going to wear masks at this point, no matter what we say. They may eventually resume masking, but they are not going to go from not masking at all to wearing a mask all the time. And even for those that are, masks aren't 100% effective on their own but are a crucial part of layered mitigation strategy (see: the "Swiss Cheese" model). Everyone should know about other mitigations that reduce Covid's infectivity. CPC mouthwash is easy to get people to agree to using, because it's cheap and easy. Most people have not heard about this layer of protection, and this one is not hard to get people to start doing.

HOWEVER! We don't want these non-mask mitigations to be used as a way to avoid asking someone to wear a mask just because it's uncomfortable or very difficult to bring up the topic of masking. The fear is real, right? It's scary to bring up masks sometimes. It's scary to be direct, and scary to risk losing someone, or to feel like by doing so, you're giving them a 'reason' to distance themselves from you.

But we want to make sure that people are at least saying, "Hey, this is what would really, actually, truly protect you, and your community, and me, and this is what I would hope for you to be doing and what my real ask is here." That sentence is really, really hard to say, but this is a situation where every second does count. Someone could be disabled at any time by this virus. So we want to make sure we're talking about respirators, somehow, even in the first conversation. And then saying, I get that this is a lot to take in. I also want you to know that there are other mitigations you can take also.

Asking people to wear masks is really crucial. You can't know why people are avoiding masking until you try suggesting masks. It can be brief, but don't suggest CPC mouthwash and not bring up masks at all. Please do not do that.

In the past, many of us avoided asking people directly to wear a mask around us, even people who know and love us already. We were each scared of losing even more friendships than we have up until now. But our close friends know us and trust us. We have a foundation.

So, we're each trying to overcome that shyness / social programming / fear of losing people / fear of upsetting others by just saying:

"I'm not going to like, harp on it and you obviously can make your own decisions. But I really do wish you would wear a mask in public spaces, because I'm personally affected by this choice that everyone is making right now, and I'm stuck at home indefinitely, and you are more vulnerable than you think, and I want both of us to be safe. Wearing a mask could save your life. I am asking you to wear a mask."

We've got to remember that what we are asking is NOT rude. We are asking for the opposite of rudeness. We are asking for our humanity to be considered, for people to opposite of rudeness. We are asking for our humanity to be considered, for people to consider their own humanity.

It's not rudeness to ask others to wear masks.

Additional mitigations to encourage

- Encourage them to stay home when they are feeling sick, even if they don't think they're contagious.

- Encourage them to open windows and improve ventilation at home when other people are visiting and explain why this is important.

- Show them how to switch their AC fan from "auto" to "on" when people are visiting (along with opening windows and turning on other fans) and explain that ventilation reduces risk because Covid travels in the air like smoke.

- 📝 Having an air conditioner does not count as improving ventilation. Increase air movement by turning up available fans including AC and opening windows. In larger buildings (usually businesses, schools etc) the AC and ventilation might be the same and buildings may even have HEPA filters and ventilation but not have it on due to cost saving or other reasons. In this context, turn the system from 'Auto' to 'On' while the room/building is occupied for cleaner indoor air.

- Basic ventilation at home: Put a fan in a window (facing out the window) and open that window. Open another window on the opposite side of the room/house for cross airflow.

- Climate control: Whether it's hot or cold outside, having the windows open a crack on opposite sides of the house will increase ventilation without sacrificing clim control.

- If possible, give them rapid tests or PCR tests to keep at home (make sure they know how to use them)

- Encourage them to move plans outdoors as often as the weather allows. For example, help them pick a restaurant that has outdoor seating, patio heaters, or misters if they're planning a restaurant celebration.

- Encourage them to keep up with Covid transmission data, if wastewater tracking is available in their area. And teach them how to find this info!

- Tell them about / buy them some CPC mouthwash, which studies have shown to be effective

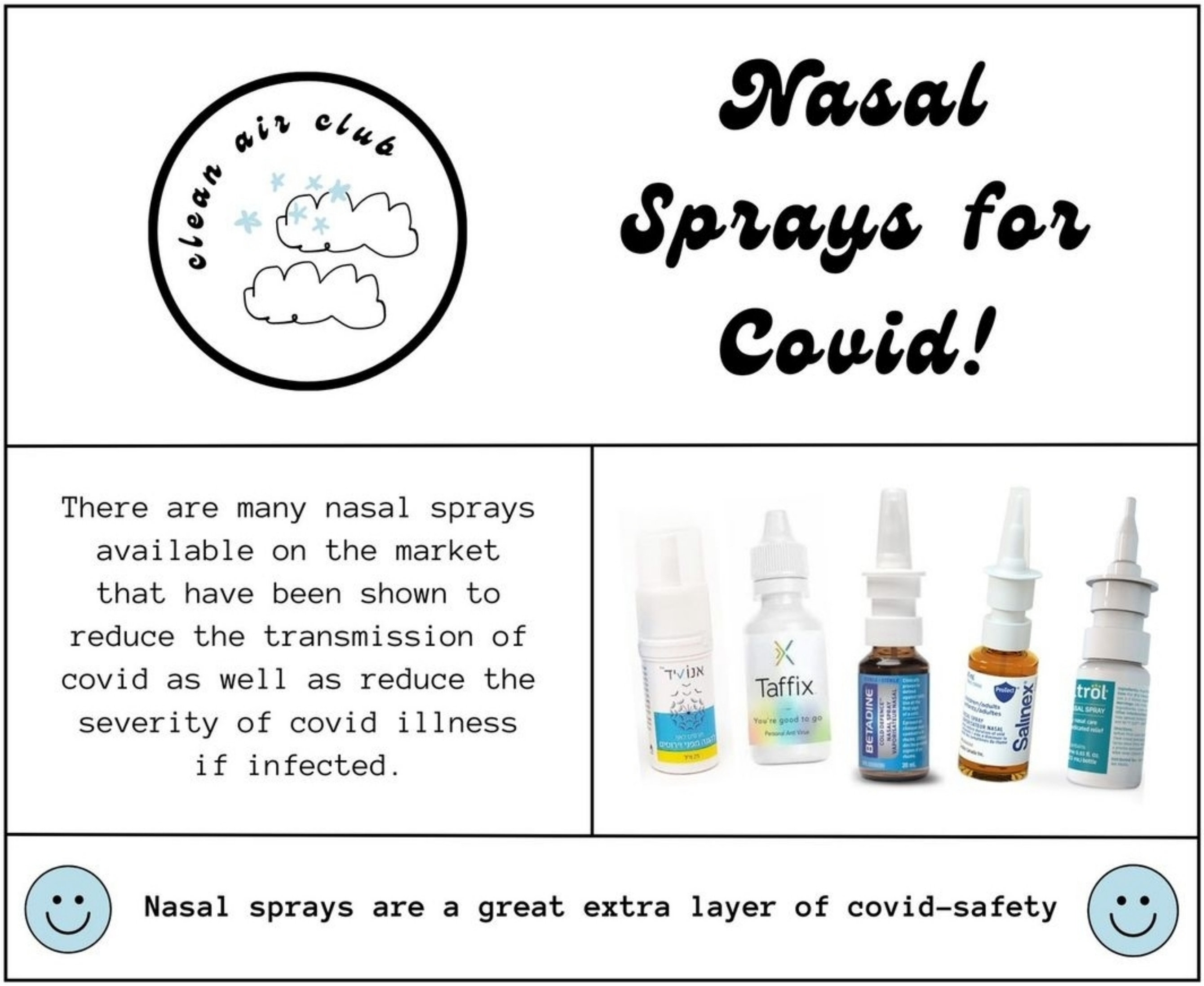
  at reducing the infectivity of Covid. CPC in mouthwashes has been shown in humans to break the membrane of SARS-CoV-2 and reduce the amount of active virus in saliva and is very inexpensive:

  - Crest Gum Care Mouthwash, Cool Wintergreen, CPC (cetylpyridinium chloride) Antigingivitis/Antiplaque Oral Rinse 16.9 fl oz (Pack of 4)

  - Here's a bunch of CPC mouthwashes that you can buy at Target in the USA (in store and online)

  - This one by TheraBreath is certified gluten-free, alcohol-free, and free of dye

- Tell them to use nasal sprays before and after potential exposures. Here's a guide to the ones with studies to back them up:



Nasal Sprays for Covid!

There are many nasal sprays available on the market that have been shown to reduce the transmission of covid as well as reduce the severity of covid illness if infected.

Nasal sprays are a great extra layer of covid-safety

- Tell them about HOCL spray. Studies have shown that it can be an effective antiseptic against many viruses including SARS-CoV-2 It can be used directly on skin. (here is an example)

- Buy them / encourage them to buy a HEPA filter to use at home, at work, or in their child's school, or build them a Corsi-Rosenthal box.

- HEPA filters can be expensive, but they often go on sale. Check sites like Walmart, Target, Best Buy, and Amazon regularly for sales, or set a price alert on Google to be notified about deals.

- Keep shopping carts open in several tabs and wait for price drops

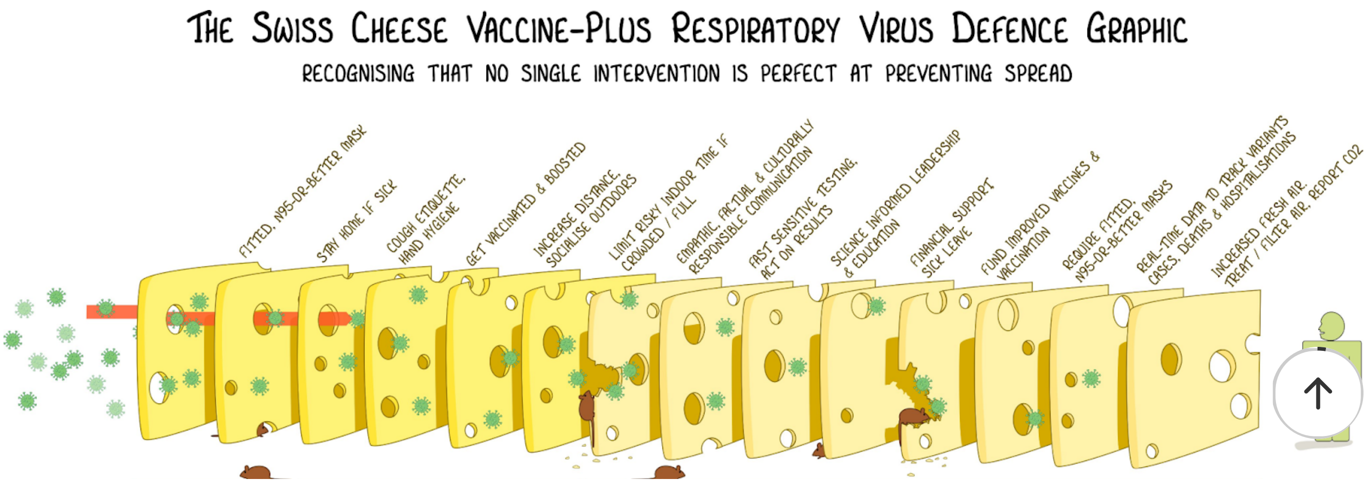
- If you can afford it, buy an Aranet4! And carry it with you everywhere. Having the data can really help people grasp the indoor air quality problem and measuring air quality can help you learn more intuitively what high risk situations look like. I waited until they went on sale and I'm using it to talk to people about Covid safety (and logging my readings on the Raven app whenever I have to go someplace.)

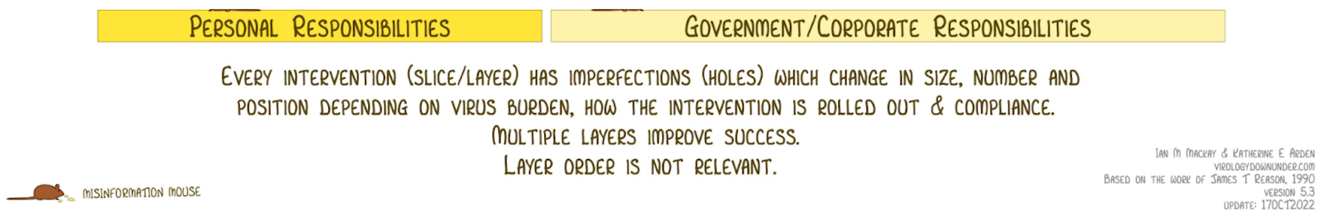
- Search Twitter / Google for "Aranet coupon" and you can probably snag a $30-$50 discount

- Here's a video specifically about testing a bunch of under-$100 CO2 testers. A few are good enough to know if you're in a high risk situation, but their accuracy is hard to guarantee

- Here is another list of affordable CO2 monitors

The Swiss Cheese model


THE SWISS CHEESE VACCINE-PLUS RESPIRATORY VIRUS DEFENCE GRAPHIC
RECOGNISING THAT NO SINGLE INTERVENTION IS PERFECT AT PREVENTING SPREAD
FITTED, N95-OR-BETTER MASK
STAY HOME IF SICK
COUGH ETIQUETTE, HAND HYGIENE
GET VACCINATED & BOOSTED
INCREASE DISTANCE, SOCIALISE OUTDOORS
LIMIT RISKY INDOOR TIME IF CROWDED / FULL
EMPATHIC, FACTUAL & CULTURALLY RESPONSIBLE COMMUNICATION
FAST SENSITIVE TESTING, ACT ON RESULTS
SCIENCE INFORMED LEADERSHIP & EDUCATION
FINANCIAL SUPPORT SICK LEAVE
FUND IMPROVED VACCINES & VACCINATION
REQUIRE FITTED, N95-OR-BETTER MASKS
REAL-TIME DATA TO TRACK VARIANTS CASES, DEATHS & HOSPITALISATIONS
INCREASED FRESH AIR, TREAT / FILTER AIR, REPORT CO2


PERSONAL RESPONSIBILITIES
GOVERNMENT/CORPORATE RESPONSIBILITIES
EVERY INTERVENTION (SLICE/LAYER) HAS IMPERFECTIONS (HOLES) WHICH CHANGE IN SIZE, NUMBER AND POSITION DEPENDING ON VIRUS BURDEN, HOW THE INTERVENTION IS ROLLED OUT & COMPLIANCE.
MULTIPLE LAYERS IMPROVE SUCCESS.
LAYER ORDER IS NOT RELEVANT.
MISINFORMATION MOUSE
IAN M MACKAY & KATHERINE E ARDEN
VIROLOGYDOWNUNDER.COM
BASED ON THE WORK OF JAMES T REASON, 1990
VERSION 5.3
UPDATE: 17OCT2022

(Image sourced from: this tweet)

Testimonies

Here's some powerful ones:

- "I want my now 6 year old daughter to grow up to be an emotionally and physically healthy woman. I want her to have healthy parents well into her adult life. I don't want her to experience the trauma of losing friends to debilitating illness and/or death as children." -Geoff Nesnow "We Can't Wish Covid-19 Away"
- "A letter to my loved ones about Covid-19: You've moved on, but I'm still here" by Jeanine Santucci
- "My Life With Long Covid" (NYT)

Pandemic analysis sources

People whose analysis of the pandemic we largely trust:

- Movement Memos

- Death Panel

- The People's CDC

Further reading

- "People Gave Up on Flu Pandemic Measures a Century Ago When They Tired of Them—and Paid a Price" -*Michigan Medicine*

- "How The Koch Network Hijacked The War On Covid"-*Lever News*

- "Ten Covid Facts Health Officials Dangerously Downplay"-*The Tyee*

- "What if Covid Reinfections Wear Down Our Immunity?"-*The Tyee*

Navigating the world

Traveling safely during the pandemic

Ideally no one would be traveling during an ongoing pandemic. But we understand that many of us don't have that option, for many different reasons. So this is an attempt to collect some tips for how to travel as safely as possible.

Fortunately, the same techniques that apply in other areas of our lives apply here, too. The “Swiss cheese model” works on planes and trains and cars and boats and public transport and hotels (and so on).

- Wear a mask (FFP2/3/N95/etc)
- Do what you can to improve airflow. Open a window or even bring a portable HEPA.
- Bring some masks for others! Being able to hand out factory-wrapped masks when someone asks is a great way to help other people be safer and have some of the other conversations throughout this doc!
- Travel during off-peak times. Depending on where you live and what kind of transport you’re taking, you can probably guesstimate when things will be busiest.
- Take advantage of various tools that exist to track traffic:
    - flightradar24 for planes
    - your local train/ferry/bus app
    - various mapping tools (Google/Apple Maps, Citymapper, etc.) can be useful for this, as they often have traffic flow built-in, or you can even check traffic webcams
    - you can also check Google’s popularity estimator
    - Some tips for searches: “(airport) busy times”, “quieter travel (travel network)”, “traffic at (location)”, “traffic webcam (city name)”.

- There are plenty of additional mitigations you can add to your routine. Nasal sprays and mouthwash can be found in travel sizes, and are sometimes sold at stations or in airports.

- For long journeys where you won't be in a safe environment for removing your mask, or as necessary, see if you can get a SIP valve. It is not a 100% perfect solution, but for situations where it is necessary, it is better than taking off your mask entirely. (More details on these valves can be found in this helpful thread.)

Modes of Transportation

Cars

The safest way to travel (if we're only talking about Covid) is by taking your own car or the car of someone you trust. You can control the air (more or less), and if traveling with others, you can do things like testing, masking, and keeping windows open.

If you are traveling in a rideshare vehicle or taxi, you can't really control what prior occupants have done. But you can wear a mask, and if you feel up to it, you can encourage the driver to do so also. You can also ask to open the window(s). Some people have had success bringing their CO2 monitor along for the ride, and using that as a conversation starter. We've had really good conversations with drivers about mask types and why masks are still necessary. Many drivers and other gig workers know all too well the risks and likelihood of getting sick on the job, so you can be their passenger today that doesn't put them at risk!

Another thing you might do is drop a note in the pickup notes section some rideshare apps have and just mention that you are wearing a mask to avoid getting sick, not because you are sick, this can help put your driver at ease and be a good way to start a conversation, if you wish. (Don't feel you have to do this every time, of course!)

For transport workers

In addition to following the tips above, you might want to look into a SIP valve, and consider an in-car portable HEPA. You are doing a hard and unforgiving job, so anything you can do to take care of yourself and your passengers will benefit you in the long term. (One of the authors of this doc was recently in a rideshare where the CO2 hit ~2200!)

Public transportation, short and long distance (buses, trains, ferries, etc)

Some systems will allow you to open windows, but not all. If you're taking the ferry, there may be an outdoor section. Generally speaking though, these are systems with uneven air changes and lots of people using them. Still, plenty of people have managed to take public transportation throughout the pandemic without getting sick; they wear good masks and try to travel during quieter times. If you have a CO2 meter, try gathering data along your usual route(s) and see if you might need to reconfigure. Public transit systems do not always have filtration systems, or if they do, sometimes you will need to rely on them being switched on. Some people have had success bringing portable HEPA units onto trains with private cabins, but this is often expensive and limited in terms of availability. A portable HEPA certainly won't hurt, though.

Airplanes

The same advice for other forms of transit applies here, with a few caveats. One thing to note is that airplanes generally have some degree of filtration for their onboard air systems. However, the filtration systems are not switched on until the plane has left the gate. Before the plane starts moving, treat the cabin as you would any other potentially infectious environment. In fact, even when the plane is in the air and has switched to internal air, you should still treat it that way; as this Twitter thread points out, a densely packed cabin means you're still at a high level of risk. Avoid flights as much as possible, or wear a fitted high quality mask throughout the flight. The SIP valve is your friend.

Cruises/long distance journeys by ship

Honestly, there are not very many ways to travel safely by ship. You are trapped in a small space on a large vehicle surrounded by hundreds (if not thousands) of people. And on cruises, your fellow passengers will hop on and off the boat, visiting multiple towns and cities along the voyage. Unless you have absolutely no other way to get from point A to Z, just say no to these methods of transportation. But if you must travel long distances on a ship, try to bring a portable HEPA and wear your mask as much as possible.

Staying in hotels

All of the above advice can and should be applied when you're staying in hotels. This thread is an interesting look at the specific design and technical features of most hotel rooms, though this may vary by region, hotel chain, etc. When in a room, since you don't know how long it has been since someone else was in there, most people suggest running a HEPA filter for at least an hour before taking your mask off. It's also smart to sanitize surfaces in the room with disinfecting wipes. You may also want to bring your own sheets/covers or request new ones. Hotels have been short-staffed, and taking these extra steps can help in case the room wasn't thoroughly cleaned (or someone sick stayed there before you).

An Airbnb or other short term rental may be safer, but you still have no control over who was in the space before. And if the Airbnb is a shared space, you are totally reliant on the kindness and Covid-sensibility of the owner. There are some other options (here's another good Twitter thread). Doing some research in advance will set you up for a safer journey.

How to talk to children and youth about Covid

Living in a pandemic is challenging. Caring for children and youth is challenging. Caring for children and youth during an ongoing global pandemic… ‘challenging’ is putting it lightly. However, we are certainly not the only people experiencing these challenges, even when it sometimes feels this way.

Here, we’ll discuss talking with general ideas and tips for talking with children in our care, some considerations for navigating a school environment, submitted suggestions from caregivers, and resources that may help.

Ideas and tips

If you are caring for a young person, you have likely realized that they are smart. They are able, adept, and capable of learning and experiencing the worlds around them. Living in a pandemic is a *big* experience, and most people had little preparation for this experience prior to 2020. Presented are some ideas and tips for talking with kids. Some of these might be relevant to the children in your care, and some of these may not apply. Just like adults, kids share some similarities while also being unique individuals with different needs.

These conversations will likely not all happen at once. They may arise during teachable moments in day to day life; when putting on your mask, for example, you might take this chance to discuss masking and safety.

Explain the science

For some kids, understanding the science and how things work helps them understand big concepts easier. You can explain the science of Covid in terms the children in your care will understand. Explanations should be tailored according to their age. It's a good idea to break the idea down into pieces and then add the amount of detail that's appropriate for their age. For Covid, some main points of discussion could be:

1. **Airborne spread**: Explain how the germs that cause Covid are in the air. Covid germs spread when a person who is sick breathes out germs from their lungs. When people gather indoors together, without open windows or ventilation, it's easier to become sick because there are more germs in the air being shared.

2. **Why masks work**: Masks protect our nose and mouth from breathing in germs that enter our lungs. Masks help stop many different germs. The best masks are ones that fit snug on our faces, so all the air that comes in and out of our bodies is passing through the mask.

3. **Safe and risky places, with solutions**: Providing solutions and strategies for being in different places can be a good Q&A problem solving activity. One person (kid or adult) can toss out suggestions for potential spaces, and the other can provide the solutions. For example: Space is outdoors. Solution: If there are people nearby, we'll wear a mask.

4. **Protecting yourself and others**: Emphasize how important staying as healthy as we can be is important. Being sick isn't fun, and we all want kids to be able to do the fun things they enjoy. We know everyone is vulnerable to this virus, and we all deserve to be safe.

5. **Long Covid**: Some families have come up with a variety of different terms for this, including 'forever Covid' and 'Covid that doesn't go away'. Explain how this would limit the fun activities the kids can do, and the adults around them. Some kids resonate with the math: 1 out of 5 people have Covid that doesn't go away (according to the CDC).

6. **Cats and dogs can get Covid**: Kids love their family pets. Talking about staying healthy for people and pets can give one more example of why keeping Covid out

healthy for people and pets can give one more example of why keeping Covid out of the family home is important.

Science is not intended to be scary. But sometimes, science can be scary. One strategy to overcome the fear is providing concrete strategies of things we can do. For example, you might say: “Long Covid sounds scary, but we know what we need to do: avoid becoming infected with Covid. And if we do get Covid, we try really hard to not become infected again.”

If the children around you are older, they may want to see more information that they can read and understand on their own. An excellent resource is the Public Health Agency of Canada, which discusses the effects of Covid, Long Covid, and ongoing effective mitigations. The language is written in a way the general public can understand, approximately at a Grade 6 reading level.

Your perspective

For some kids, personal stories resonate greater than science. Consider sharing why you are taking the safety measures you’re taking, and why this is important. Is it to protect yourself? Or someone else? Is it to avoid the risks of Long Covid? There are so many reasons to avoid Covid. Sharing your own reasons can create greater understanding for those around you.

Prior knowledge and explaining differences

Kids come across information from a variety of different sources in many different ways, be it from their extended family, friends, the media, or elsewhere. If you are practicing strict ongoing disease mitigations, these practices may not be common in your area. Here are three effective notes to talk about this difference:

1. Being different is okay. It's okay to do things differently, because people can be very different from one another.

2. We don't have to be like everyone else. We do what's best for us and those around us. If some families don't wear masks or don't avoid large gatherings, that is their choice. And we make our own choices that work for us.

3. Is this information true? We hear and see all sorts of information, and not all of it is correct. Comparing the source and where the information came from to a known true source is an excellent skill to have, whether we're talking about the pandemic or not.

Respect

Just like us, children and youth are living through and navigating an ongoing pandemic. Take moments to acknowledge the incredible and commendable work they are doing. Speak to them with respect; they deserve it.

School environments

Traditional schooling has never been the only option. There are a variety of ways for students to get an education, including traditional schooling, homeschooling, or virtual schooling. For homeschooling, there are a variety of curricula available to suit many different families and cultures. Virtual school is available in many countries in a variety of forms. We can find the systems that work best for us, even when they aren't common. The method of instruction that works best for you and your family is the right one.

Navigating Covid in the current school system can be incredibly challenging. There are many different schools that can operate in many different ways, even in the same regional area. One recommendation would be to reach out to parents who share your same concerns. If there are none in your area, the search can be widened to a larger zone. Sometimes a post on social media or messages to like-minded folks can get the momentum started (on Facebook there are many 'Still Coviding' regional groups). A small group of parents can be incredibly powerful, especially when there is science and compassion on their side.

Parents respond: How do you talk with your children about Covid?

> I lived with a chronic illness and my daughter understands the importance of protecting my health. While I've recovered, she continues to wear a mask to protect others who are sick or vulnerable. We always frame it to be about the collective and social justice. She's been such a champ.

-CC

> My kid was 8 years old when Covid first started. She played the game Pandemic and watched an anime called Cells at Work, which helped explain what was going on. Plus, she's a big aficionado of Japanese entertainment, and masks aren't looked down upon there.

-JO

> I give accurate information. They know it's airborne, the difference between a mask and a respirator. They know what fit testing is and why it's needed and that 'mild' SARS2 infection can cause immune/organ/etc damage. They know it's easy to stop transmission with science based policies.

-FMK

> Kids are in college. Every phone call ends with 'Are you wearing a mask? Using Enovid?'

-SC

> My son is autistic and masks were very difficult at first due to sensory issues. After we talked about safety and how we wear masks to protect others and ourselves, it was a non issue. He wears his mask every time we go out and even reminds others.

-LMM

> She knows Covid is bad. She knows masks help reduce the risk of contracting. We're open with her about sharing feelings on masking. She's more concerned about her friends not masking and getting sick than she is about being the only masker.

-CO

> We've discussed airborne transmission at length. Both kiddos understand how Covid spreads and they also know it's bad news. I've tried to be honest without terrifying them, so they know it can disable you. They also know the government is hiding a lot of info from us, but I generally try to let them ask questions rather than just telling them stuff.

-SB

> For masks, I use the same line as flu shots. We wear masks to protect our friends and people who can't wear them. My kids don't love masks. But they've never complained, because they know that the world they live in is bigger than they are. They also enjoy not being sick. I'm not sure if they remember what it's like to have a cold. They have very few memories of the snotty nosed before times.

-HJ

> We explain to them that because it's a new virus we don't know the full scope of how it's harming people. We recently explained how the immune system works and what can happen when it's damaged. That seemed to resonate with them as well. My kiddos are 6 and 8 years old. We have watched How do people catch a cold? Ask the Storybots a few times as kind of a springboard to chat about the difference between a cold and Covid and why masking is an excellent layer of protection.

-SSB

Resources for children and youth

Books

- COVID-19 Pandemic Children's Book Collection by University of Virginia Library.
- Germs, Viruses and Vaccines for Kids is a staff-created list from the Chicago Pu Library

Library

Videos

For younger kids:

- How do people catch a cold? Ask the Storybots

- Nastya and a song for children about masks

For older kids:

- Airborne Spread of Covid-19: How to Prevent It, And Other Respiratory Disease

For all ages:

- Covid-19 vaccines: Keep them safe

How to deal with grief: From 'normal' to normal

How to deal with grief: From "normal" to normal

📝⚠️Important: None of us are mental health professionals. The following section represents the reflections of people living through and coping with pandemic grief, sharing our thoughts with others doing the same.

How to deal with grief in times of global crisis

We want things to go back to normal. But normal is what got us here. Now, we find ourselves in a state of climate catastrophe, unmitigated spread of disease, war, and fascism.

Normal will eventually wither away our world if we continue to cling on to it. We cannot hold onto something that is dying. Reminiscing on getting back to normal is holding us back from creating a better world. The truth is this: The earth is dying. People are dying. Genocide is happening. Animals are dying. People are starving. People are losing their homes to the climate crisis. People are enslaved even on this very soil we call our home. The people, the animals, the plants and the earth are dying. To be more accurate: the earth isn't dying, we are killing it, and the symptoms of death are the result. We aren't free if we're clinging on to death. We'll never be free until we face it and let go.

This is a huge thing for people to grapple with. It's overwhelming and carries more weight than anyone alone could bear. When confronting this reality, we have to remember what we are experiencing is grief. We all are dealing with grief. To grapple with this means each of us have to grieve the loss of what we thought we would have, grieve vision(s) of our future and our children's futures. We have to Grieve our former plans, hopes and dreams, because they cannot fruitfully exist in a dying world.

Grief is tough. Most of us have dealt with grief in the form of losing a loved one or a pet. Many of us haven't even yet dealt with grieving the things we envisioned for ourselves. To grieve something as big as our future; it's understandable to want to push this grief aside. But not dealing with it doesn't mean the loss goes away. We cannot change our future for the better without acknowledging our current reality. But we have to face it to change it. We have to grieve to move on. We must process this and heal. This is a huge thing to face.

It's a big ask to truly let the old world go.

> Not everything faced can be changed but nothing can be changed until it is faced

-James Baldwin

But after grieving the old world and letting go opens up so many possibilities, we get to imagine a new normal, a new future. Grief opens us up to new possibilities for our world. One that is safe and healthy. Where people are fed and housed. Where we create things that are sustainable, useful and fun. Where we repair the harm humans have caused to the planet and to ourselves. We have to fundamentally change course and think differently. Our whole mindset has to change if we want a chance to create this world.

The old normal will come to an end eventually. We can only choose if it ends in disaster or in healing. It's time to choose.

There are stages to grief, but usually those apply to expected things, like the loss of a loved one. How do we grieve a loss as big as this?

Stages of grief

Shock and denial

Shock is the stage of grief where we continue to behave normally detached emot
because the gravity of the situation has not sunk in yet. It seems strange to receive bad

news and get up and say *well, is anyone hungry*? or *hey, let's go see that new movie*. Almost as if you never received the news. But this is a normal reaction for people in the initial state of shock.

Dealing with the shock of the climate crisis, pandemic and ongoing global crises is a huge shock, because so much of what's happening is not in our control. We kind of know what's happening, but we are so used to normal that we often go on autopilot. The news is so big and so heavy we effectively stand still in our "normal" lives, often not acknowledging these truths, or only acknowledging in part just how bad things are. This shock can lead us towards denial. It is moving from a numb disbelief to the denial of one's feelings towards the new reality.

This is when many people will intentionally ignore reality because to our brains, reality is a threat that they can't deal with. Denial is knowing the reality but actively choosing to ignore it because it's so overwhelming. The climate crisis, pandemic, and fascism are all overwhelming things to acknowledge. These are big problems and as individuals, we can feel powerless. So we often turn to denial. This can be as simple as pretending to not be aware of some information, finding conflicting information that seems more palatable, pretending that everything's fine, keeping distance from people who acknowledge reality, or finding other ways to avoid facing the problem. But ignoring it and proceeding as normal doesn't mean these things aren't happening.

Denial can last a long time. Many people never get out of denial. In fact, this is where many people are right now: stuck in the first stage of grief, denying themselves of the freedom of moving on.

In order to move from denial or help others do the same, it's important to acknowledge being overwhelmed by reality is human and valid. You must understand that no one is a bad person for being in denial. It is a part of our western society to normalize and minimize these crises, because there are people with power and money that benefit from things not changing. You must give yourself compassion and grace. Grief, in all stages, is normal; it is a fundamental part of being human. Moving on from denial comes with a lot of emotions that make it overwhelming. Understand that as humans we are supposed to feel all of these emotions. Emotions are natural human respo and engaging with them is engaging with parts of our humanity.

How do we process these emotions? We have to talk to each other. We have to move out of the expectation of silent disengagement of the horrors of reality. Start by talking to your friends, family, neighbors or a therapist (if you have access to one). To move on, we have to learn to acknowledge and process what is happening, how we got here, and how we feel—about it and ourselves.

Lastly, find a community and start reaching out. Find a community that will keep you accountable to your values and where you feel safe. Processing grief must be done in community; grief in isolation is not effective.

Resources to find community

Finding community can be a challenge. Everyone is grieving right now, and finding your people takes time. Try to be gentle with yourself and not give up.

- Calling Up Justice
- One Free Community
- SARS Safe Socials
- Covid Isn't Over
- CovidMeetups

Some Instagram accounts that talk about grief in an anti-colonial way (and sometimes host free online events)

- @queerdeathcollective.pdx
- @queercommunitydeathcare
- @riotous_roots
- @sickinquarters
- @dr.rosalesmeza

Therapy resources

- Covid-Conscious Therapist Directory
- Inclusive Therapists: therapy resources for BIPOC, the 2SLGBTQIA community, and for disabled people
- Mental Health Counseling for Our Communities: Free therapy for Black People
- Zepp Wellness Center: Black therapy resources
- LatinX Therapy: Latinx therapy resources
- National Queer and Trans Therapists of Color Network

Pain and guilt

Coming out of denial brings a lot of pain, because this is the first step towards accepting a new reality. A lot of emotions come with this. You may feel like there is an emptiness that can't be filled anymore. The void that's left behind after a major life change might even feel similar to the void left behind after a death. Maybe you would talk to that person everyday and now you can't; there is a void in your life. Grieving a lost future is much like this. You've spent so much time envisioning it and planning for it, only to realize that the world you planned for doesn't exist. Many of us experience this when a huge part of what we had planned for our future chances. For example, you might grieve your lost future after the sudden loss of a loved one, after the end of an abusive relationship, after the loss of a job or loss of a home, or after a sudden loss of health.For some of us, our future may never have been clear or had a positive outlook to begin with. Whatever you have experienced or envisioned in your life leading up until the pandemic, you were most likely unprepared for this type of grief.

None of us expected the world to change so dramatically. We don't typically expect the framework of our life or the earth we inhabit to start crumbling. It's a scary reality to accept, and it's normal to feel pain and guilt. You may be asking yourself: What can we envision as a future if everything must change for our survival? How do we plan for our future if it's uncertain? What are our goals for ourselves? What can we do about the current way of life that isn't working in a collapsing world?

There may be a feeling of wishing you had realized the truth sooner. You might have a guilty sinking feeling or wish that you could have done something else with your time. Maybe your inner monologue is: “If only I had realized sooner. If only…if only…” And it's OK to feel this way; all of the emotions we feel are human and valid. It is also human to not have understood how bad things were before now. Every effort was made by those in power to keep all of us in the dark about the pandemic in order to uphold the status quo.

Lastly, you may also have a feeling of losing time. What about all the time and effort we put into our former lives? Looking back, you may wonder, ‘Was it a waste?’ You may feel like you wasted your life to come to this point. Many of us are becoming more and more aware of the deep inequities in our society. Many of us are realizing that our institutions don’t value our lives, or see our humanity at all; this is painful to come to terms with. You may ask yourself, “How did I miss this? What was I thinking?” Again, guilt and pain are human feelings, and allowing ourselves to feel the weight of these emotions is important. When we allow ourselves to face reality and feel the weight of losing the futures we once envisioned, we can move away from the guilt we may have around letting go of our old normal. We can start the process of letting go because we know now that we must.

Remember: we grieve in solitude but we also grieve in community. We are individuals, but we are also a part of a greater community. Grieving in community (and even alone) is always difficult. Not just because some emotions are difficult, but because Western culture conditions us to turn away from these emotions. Many of us were raised in cultures promoting a toxic positivity, “good vibes only” mindset. We may even feel guilty for bringing down the mood with our own pain. There is almost an expectation to look at everything on fire (figuratively and literally) and just think happy thoughts, or turn away. But turning away from negative emotions is turning away from our humanity. We have these emotions for a reason, to guide us towards a different path. The sadness we feel at seeing injustice is a call to action, and a call toward building a more just world.

We can learn to view ourselves and others with compassion. We can encourage the people around us to do the same. Compassion is a building block of a strong community. And community is what we need most of all if we’re going to build a new future, a new normal.

to be continued!

#MASKUP

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